



CHILD CARE AND DEVELOPMENT FUND PLAN
FOR
FFY 2004-2005

This Plan describes the CCDF program to be conducted by the State for the period 10/1/03 – 9/30/05. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 162.57 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

(Form ACF 118 Approved OMB Number: 0970-0114 expires 02-29-2004)

TABLE OF CONTENTS

AMENDMENTS LOG

PART 1 ADMINISTRATION

PART 2 DEVELOPING THE CHILD CARE PROGRAM

Section 2.1 - Consultation and Results of Coordination

Section 2.2 - Public Hearing Process

Section 2.3 - Public-Private Partnerships

PART 3 CHILD CARE SERVICES OFFERED

Section 3.1 - Description of Child Care Services

Section 3.2 - Payment Rates for Child Care

Section 3.3 - Eligibility Criteria for Child Care

Section 3.4 – Priorities for Children and Families

Section 3.5 - Sliding Fee Scale for Child Care Services

Section 3.6 - Certificate Payment System

PART 4 PROCESSES WITH PARENTS

PART 5 ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND
AVAILABILITY OF CHILD CARE

Section 5.1 - Quality Earmarks and Set-Aside

Section 5.2 - *Good Start, Grow Smart* Planning & Development

PART 6 HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS
(50 States & District of Columbia only)

Section 6.1 - Health and Safety Requirements for Center-based
providers

Section 6.2 - Health and Safety Requirements for Group Home
providers

Section 6.3 - Health and Safety Requirements for Family providers

Section 6.4 - Health and Safety Requirements for In-Home providers

Section 6.5 - Exemptions to Health and Safety Requirements

Section 6.6 - Enforcement of Health and Safety Requirements

Section 6.7 - Exemptions from Immunization Requirements

PART 7 HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

APPENDIX 1 -- PROGRAM ASSURANCES & CERTIFICATIONS

APPENDIX 2 -- ELIGIBILITY AND PRIORITY TERMINOLOGY

APPENDIX 3 -- ADDITIONAL CERTIFICATIONS (on file - not included here)

REQUIRED ATTACHMENTS

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

AMENDMENTS LOG

Child Care and Development Services Plan for
For the period: 10/1/03 -- 9/30/05

SECTION AMENDED	EFFECTIVE/ PROPOSED EFFECTIVE DATE	DATE SUBMITTED TO ACF	DATE APPROVED BY ACF

Instructions:

- 1) Lead Agency completes the first 3 columns and sends a photocopy of this Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional contact. A copy of the Log, showing the latest amendment pending in ACF, is retained in the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the same Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain those "old" plan pages that are superseded by amendments in a separate appendix to its Plan.

PART 1 -- ADMINISTRATION

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

1.1 Lead Agency Information (as designated by State chief executive officer)

Name of Lead Agency:	Washington State Department of Social and Health Services
Address of Lead Agency:	P.O. Box 45000 Olympia, Washington 98504-5010
Name and Title of the Lead Agency's Chief Executive Officer:	Dennis Braddock, Secretary
Phone & Fax Numbers:	Phone (360) 902-7800 Fax (360) 902-4723

1.2 State Child Care (CCDF) Contact Information (day-to-day contact)

Name and Title of the State Child Care Contact (CCDF):	Rachael Langen, Director
Address of Contact:	Division of Child Care and Early Learning PO Box 45480 Olympia, WA 98504-5480
Phone & Fax Numbers:	Phone (360) 413-3209 Fax (360) 413-3482
E-Mail Address:	Langer@dshe.wa.gov

1.3 Estimated Funding

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2003 through September 30, 2004. (§98.13(a))

- CCDF: \$106,705,285
- Federal TANF Transfer to CCDF (if known): \$95,000,000
- Direct Federal TANF Spending on Child Care (if known): \$81,000,000
- State CCDF Maintenance of Effort Funds: \$38,707,605
- State Matching Funds: \$30,720,798
- Total Funds Available: \$352,133,688

1.4 The Lead Agency estimates that the following amount (and percentage) of the CCDF will be used to administer the program (not to exceed 5 percent): \$11,600,000 (5 %). (658E(c)(3), §§98.13(a), 98.52)

1.5 Does the Lead Agency directly administer and implement all services, programs and activities funded under the CCDF Act, including those described in Part 5.1 – Activities & Services to Improve the Quality and Availability of Child Care, Quality Earmarks and Set-Aside?

() Yes. – GO to Section 1.8.

(X) No, and the following describes how the Lead Agency maintains overall control when services or activities are provided through other agencies. (658D(b)(1)(A), §98.11)

The Department of Social and Health Services (DSHS) will retain overall responsibility for program administration including: 1) serving as single point of contact regarding administration of funds; 2) determining use and priorities for block grant expenditures; 3) promulgating rules and regulations governing administration; 4) submitting required reports; 5) ensuring compliance with the plan and federal requirements; 6) overseeing expenditures of funds to sub-grantees and contractors; 7) monitoring programs and resources; 8) fulfilling responsibilities related to complaints, compliance, hearings, and/or appeal actions.

DSHS will develop written agreements, which specify the mutual roles and responsibilities of the lead agency and other agencies in meeting requirements under §98.11. Funds related to these activities will be transferred to the appropriate agency under written agreement. The agreement will specify that agencies carrying out program activities will comply with the approved state plan and federal regulations including providing such information as is necessary to DSHS to provide overall administration and reporting.

1.6 For child care services funded under §98.50 (i.e., certificates, vouchers, grants/contracts for slots based on individual eligibility), does the Lead Agency itself: (§98.11)

- Determine individual eligibility of non-TANF families? YES X NO
If NO, identify the name and type of agency that determines eligibility of non-TANF families for child care:

All Non-TANF families who are low income, involved in approved activities, and receiving child care services through Economic Services Administration have their eligibility determined by the lead agency. Exceptions are:

- the Seasonal Child Care Program for which eligibility criteria is determined by DSHS and implemented by private non-profit organizations under contracted conditions.

- **the children served by Children's Administration who are in protective service.**

- Determine individual eligibility of TANF families? YES X NO ____
If NO, identify the name and type of agency that determines eligibility of TANF families for child care:

- Assist parents in locating child care? YES ____ NO X
If NO, identify the name and type of agency that assists parents:

Statewide Child Care Resource and Referral Services (R&R) assist parents in locating child care. The lead agency has several ways to link families with the R&R which performs the referral services to locate child care.

- Make payments to providers? YES X NO ____
If NO, identify the name and type of agency that makes payments:

Note: In the case of payment for in-home child care, payment is made to the parent who in turns pays the provider.

- 1.7** Is any entity named in response to section 1.6 a non-governmental entity? (See section 1.6 of the guidance). (658D(b), §§98.10(a), 98.11(a))

() No.

(X) Yes, the following entities named in section 1.6 are non-governmental:

Benton-Franklin Community Action Council; Catholic Charities, Dioceses of Yakima; Sea Mar Community Health Center; and Yakima Valley Farm Workers Clinic.

Section 1.8 - Use of Private Donated Funds

- 1.8.1** Will the Lead Agency use private donated funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2) and (f)?

(X) No. GO TO 1.9

() Yes. The name and type of entity designated to receive private donated funds is:
Name:
Address:
Contact:
Type (see section 1.6 of the guidance):

Section 1.9 - Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children

- 1.9.1 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF maintenance of effort (MOE) requirement?

☐ No.
☒ Yes,

X The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).

20% Estimated % of the MOE requirement that will be met with pre-K expenditures. (It may not exceed 20%.)

If the State uses Pre-K expenditures to meet more than 10% of the MOE requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

- 1.9.2 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF Matching Fund requirement? (§98.53(h))

☐ No.
☒ Yes, and

20% Estimated % of the Matching Fund requirement will be met with pre-K expenditures. (It may not exceed 20%.)

If the State uses Pre-K expenditures to meet more than 10% of the Matching Fund requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

Currently a family who is eligible for Head Start/ECEAP services and needs a full day of child care may also receive child care subsidies through the Working Connections Child Care (WCCC) program. WCCC eligibility requirements and rules take precedence when a child is enrolled in a “blended Head Start/ECEAP site”. The family must meet WCCC income guidelines, the provider must be licensed or certified, and the care must be based on the parent and child’s schedules. WCCC authorizations are currently for a maximum of six months.

The lead CCDF agency is working with leadership from the federal Region X Child Care-Head Start team, the State Pre-K program (Early Childhood and Assistance Program or (ECEAP), the Governor's Head Start-State Collaboration Office (GHS-SCO) and CCDF funded subsidy programs to expand the availability of child care. In partnership, the Head Start-State Collaboration Office, the Division of Child Care and Early Learning (DCCEL) and the Department of Health (DOH), Healthy Child Care Washington (HCCW) are developing a sophisticated database to map the standards and regulations of the large Early Childhood Care and Education (ECCE) programs in Washington State. The programs to be mapped are as follows: Child Care, Early Childhood Education Assistance Program (state pre-k), Head Start, Early Head Start, and the USDA Food Program. Specific regulations and standards from these programs will be compared with national benchmarks (NAEYC and Caring for our Children National Health & Safety Standards: Guidelines for Out-of-Home Child Care Programs). Additionally, the regulations and standards will be mapped and ranked. The goal of this "Mapping Standards and Regulations Project" is to identify new paths for streamlining ECCE programs in Washington. Ultimately this will lead to more efficient and effective collaboration between programmatic funding streams and leading to more full day /full year pre-K services for the targeted population.

On May 8, 2002, a Braided Funding Think Tank which was comprised of a group of state, Federal and local early childhood professionals met to consider current barriers to using multiple sources of funding for early childhood programs and strategies for facilitating this process. Participants identified fiscal and policy successes and challenges and included representatives from:

- Region X, Department of Health and Human Services, Administration for Children and Families;
- Governor's Head Start-State Collaboration Office
- State Departments of Social and Health Services (Division of Child Care and Early Learning, Governor's Head Start-State Collaboration Project and Developmental Disabilities Council), Health, Community, Trade and Economic Development (ECEAP);
- Office of Superintendent of Public Instruction;
- Washington State Association of Head Start and Early Childhood Education and Assistance Programs;
- Foundation for Early Learning;
- Northwest Finance Circle, City of Seattle;
- Nisqually and Skokomish Tribes; and
- Numerous local and early childhood programs which blend funding from a variety of State and Federal sources.

The state is currently in the process of updating the agreements between these agencies. The guidelines will be in accordance with the recent letter

issued by the Child Care Bureau and Head Start Bureau. Revisions to the *Funding Guidelines for Programs Using Blended Model to Provide Full-day Services* are not available at this time as an attachment.

Head Start programs are applying for private funds to pilot a project that will provide the state with information on costs involved in maintaining WCCC eligibility and subsidy child care payments for the entire school year. Preliminary expectations are that such a practice may be cost neutral.

- 1.9.3 If the State answered yes to 1.91 or 1.9.2, the following describes State efforts to ensure that pre-K programs meet the needs of working parents (§98.53(h)(2)):

Individual pre-K/ Early Childhood Education and Assistance Programs (ECEAP) part day programs are encouraged to link with full-day community-based child care programs. Technical assistance is available to support these local efforts. Many Head Start and ECEAP programs provide technical assistance over a period of years to guide child care providers to the level of quality and comprehensiveness that they can become subcontractors for full-day pre-K services.

Local child care providers are encouraged to consider collaborative approaches to develop full-day programs enriched with ECEAP and Head Start pre-K services. A package of services is provided delivering child care, medical exams, home visits and family support activities, through collaborative funding and service delivery among K-12, Head Start/ECEAP, Health Services and Child Care providers. Additionally, Head Start and Early Head Start programs are providing resources for professional development for the child care staff in programs that partner to provide full-day/full-year services.

Part 2 -- DEVELOPING THE CHILD CARE PROGRAM

2.1 - Consultation and Coordination

2.1.1 Consultation. Describe the consultation the Lead Agency held in developing this Plan and the results of that consultation. At a minimum, the description must include the following:

- Representatives of local governments;
- Tribal organizations when such organizations exist within the boundaries of the State. (658D(b)(2), §§98.12(b), 98.14(b))

The lead agency held six community forums to gather input into identifying and strengthening the key components of our state's child care system. These included forums with:

- **The DSHS/Internal Child Care Coordinating Committee to gather state agency input, in Olympia on April 8, 2003;**
- **The African American Child Care Task Force, in Seattle on April 10, 2003;**
- **The Child Care Coordinating Committee and representatives of statewide stakeholder groups, in Tacoma on April 15, 2003;**
- **The Health Improvement Partnership and representatives of local stakeholder groups, in Spokane on April 22 and 23, 2003;**
- **The Yakima Child Care Coordinating Council, a community stakeholder group in Yakima on May 22, 2003.**

The plan was presented for discussion to the communities represented by the Indian Child Care Task Force, the Latino Child Care Task Force and the Asian Pacific Islander Task Force on May 15, 2003. These groups had the opportunity to also participate in the statewide stakeholder groups and any feedback is incorporated with that of those groups (see Attachment #1).

The six public forums resulted in rich dialogue and meaningful input for the improvement of the child care system in Washington State. Participants included representatives from state and local governments, health organizations, child care provider groups, non-profit community agencies and educational organizations. Each group brainstormed the key components needed to maintain our current strategies for improving child care:

- 1. Quality**
- 2. Availability**
- 3. Accessibility**
- 4. Early Learning**

Each group by consensus identified the top issue and then created a strategy to strengthen it. The complete information received via these forums is included as Attachment #1. Provided below are several suggestions that were identified during this process:

Quality:

- Establish a system for living wages for child care providers. Train providers to identify their true costs for care, educate the community; leverage non-state funds to help subsidize care.
- Provide training for providers which includes funding supports to subsidize a continuum of training.
- Provide training opportunities in a community based model; in collaboration with schools and colleges and in partnerships with Head Start, school districts, hospitals, R&R, Enterprise for Progress in the Community (EPIC) and Washington State Migrant Council (WSMC). Make available technical information for various levels of development, substitutes for day-time classes and unlimited scholarships.

Availability:

- Establish a co-pay formula structure that considers social/economic pockets of families; and provide additional subsidy incentives directly to providers serving (75-80%) low income subsidized families

Accessibility:

- Create Incentives to take “state paid.” Pay at the full monthly fee at the market rate, not penalizing high subsidized centers, include bonuses.
- Provide targeted consultation, mentoring and training/education for providers caring for special populations.
- Create a system of technical assistance and consultation, at low or no cost, to enable providers to accommodate a child’s needs and retain them in care.

Early Learning:

- Develop a statewide professional development and education system plan that is coordinated and holistic and provides pathways through the education system.
- Develop a basic written curriculum to support early learning guidelines as an optional accompaniment to the guidelines. Include pictures, materials lists for theme boxes, make available in English and Spanish. Provide as a training component of STARS; as an on-site model for homes and centers with consultants able to give STARS credit.

Our consultation process also involved circulating the draft CCDF plan to the following entities who provide services detailed within it, for their review and comment:

- Child Care Coordinating Committee

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

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- **Department of Health**
 - **The Governor's Office**
 - **The Governor's Head Start-State Collaboration Office**
 - **Office of Superintendent of Public Instruction**
 - **School's Out Washington**
 - **Washington Association of Educators of Personnel in Early Childhood Programs**
 - **Washington Association for the Education of Young Children**
 - **Washington State Child Care Resource and Referral Network**
 - **Culturally Specific Child Care Task Forces**

- 2.1.2 Coordination. Lead Agencies are required to coordinate with other Federal, State, local, tribal (if applicable), and private agencies providing child care and early childhood development services.

Check any of the following services provided by agencies with which the Lead Agency coordinates. In each case identify the agency providing the service and describe the coordination and expected results:

- ☒ X Public health including programs that promote children's emotional and mental health
- ☒ X Healthy Child Care America Campaign
- ☒ X Employment services
- ☐ Public education
- ☒ X TANF
- ☒ X State Pre-K programs
- ☒ X Head Start programs
- ☒ X Programs that promote inclusion for children with disabilities
- ☒ X Others (please identify) (658D(b)(1)(D), §98.12(a), 98.14(a)(1) & (2))

Public health programs provide local public health nurse consultation to child care providers regarding children's emotional and mental health development and behavior. This work is accomplished through contracts with the Department of Health and results in increased knowledge and skills on the part of licensed child care providers.

Healthy Child Care Washington is implemented through a contract with the Department of Health. It provides training, technical assistance and consultation to licensed child care providers to promote health and safety for infants and toddlers.

Employment Services: DCCEL spends CCDF dollars to subsidize child care for low income families participating in Washington's WorkFirst Program. These families are working or gaining appropriate skills to enter and succeed in the work force.

TANF is part of Economic Services Administration. TANF workers refer clients to call centers to access child care services when they apply for TANF benefits, thus providing better service to families. The 2001 reorganization of licensed child care and early learning functions has led to improved consultation.

State Pre-K and Head Start programs: The Governor's Head Start-State Collaboration Office and Early Childhood and Assistance Program (ECEAP) are working in conjunction with child care programs to maximize linkages between early childhood programs and child care. Intended results are the promotion of full-day services for children and high quality, comprehensive care.

Programs that promote inclusion for children with disabilities: DSHS Infant Toddler Early Intervention Program (ITEIP) coordinates a statewide system of early intervention services for children, birth to three, with disabilities and/or delays, and their families. DCCEL partners with ITEIP, and the Inclusive Child Care Committee in ongoing activities to promote cross referral of the child care and early intervention services systems. DCCEL coordinates with ITEIP to share referral processes into early intervention, link child care providers to early intervention local resources and connects families with Family Resources Coordinators who assist families in finding needed early intervention services. ITEIP works with DCCEL on public awareness outreach efforts to families who have infants and toddlers with special needs. ITEIP funding and in-kind support continues to assist in materials development and distribution to early intervention programs, providers and other activities (i.e., statewide conferences and training) to link child care initiatives with the early intervention system in Washington State.

Others:

- **The Braided Funding Think Tank**, comprised of state, Federal and local early childhood professions are working to address barriers and to create strategies for using multiple sources of funding for early childhood programs. The goal is to streamline funding streams and improve access for families.
- **Indian Tribes.** DCCEL's regional Field Managers meet quarterly with their local tribal representatives on child care issues. Ongoing coordination is also achieved through DSHS Indian Policy Specialists, DCCEL Tribal Liaison, and in cooperation with the Region X HHS office. DCCEL has worked with a tribal work group to facilitate coordination and problem solving related to tribal access to child care resources. Some of the on-going issues included: improving tribal members' access to child care subsidies, clarifying licensing and

certification definitions and differences, helping tribes get to the level of recommended health and safety standards, and making training and technical assistance more readily available to tribes.

2.2 - Public Hearing

Describe the Statewide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. At a minimum, the description must indicate:

- Date(s) of statewide notice of public hearing: **May 6, 2003**
- Manner of notifying the public about the statewide hearing: **We sent a notice and invitation to our broad stakeholder distribution list, including members of the CCCC, and posted it on our website at www.dshs.wa.gov/esa/dccel**
- Date(s) of public hearing(s): **May 27, 2003 and June 3, 2003**
- Hearing site(s): **Spokane and Seattle**
- How the content of the plan was made available to the public in advance of the public hearing(s) (658D(b)(1)(C), §98.14(c)): **We posted the draft CCDF plan on DCCCEL's intranet and internet sites for review and comment. A message containing a link to the document was also sent to our staff, stakeholders and list serve participants.**

2.3 - Public-Private Partnerships

- Describe the activities, including planned activities, to encourage public-private partnerships that promote private-sector involvement in meeting child care needs, including the results or expected results. (658D(b)(1), §98.16(d)):

Ongoing coordination around child care service delivery occurs as follows:

- a) **The state Child Care Coordinating Committee (CCCC) was statutorily created in 1988 in anticipation of federal child care regulation. This group is required to facilitate coordination and communication among state agencies responsible for child care and youth care and early childhood education services, and to make recommendations regarding improvements to state services. The CCCC serves as an advisory coordinator and annually submits a report and recommendations to the legislature regarding the state's child care system. (Please see: Attachment 2) *CCCC December 2001 Annual Report To The Legislature-The Child at the Center: Falling Through the Financial Gaps in the Early Care and Out-of-School-Time System; and***

Attachment 3) CCCC December 2002 Constructing Bridges: A path of learning from birth to K-12 schools).

Roughly one third of the Committee is comprised of state agency representatives. Community representatives and parents make up the remaining two-thirds of the committee.. According to statute, membership of the committee includes:

- **One representative each from the Department of Social and Health Services (DSHS), the Department of Community, Community Trade and Economic Development (DCTED), the Office of Superintendent of Public Instruction (OSPI), the Department of Health (DOH), the Department of Personnel (DOP) and any other agency having responsibility for regulation, provision, or funding of child care services in the state;**
- **One representative from the Department of Labor and Industries (L&I);**
- **One representative from the Department of Revenue (DOR);**
- **One representative from the Employment Security Department (ESD);**
- **At least one representative of family home child care providers and one representative of center care provider;**
- **At least one representative of early childhood development experts;**
- **At least one representative of school districts and teachers involved in the provision of child care and preschool programs;**
- **At least one parent education specialist;**
- **At least one representative of resource and referral programs;**
- **One pediatric or other health professional;**
- **At least one representative of college and university child care providers;**
- **At least one representative of a citizen group concerned with child care;**
- **At least one representative of a labor organization;**
- **At least one representative of a Head Start-Early Childhood Education Assistance Program agency;**
- **At least one employer who provides child care assistance to employees;**
- **Parents of children receiving, or in need of, child care, half of whom shall be parents needing or receiving subsidized child care and half of whom shall be parents who are able to pay for child care.**

The full CCCC or its steering committee meets monthly. There are nine subcommittees including: Health and Safety, Subsidy, Career Development, Systems, Partnership, Public Policy, Inclusive Child Care, School-Age, and Licensing.

The mission of the Child Care Coordinating Committee (CCCC) is to “improve the availability, affordability and quality of culturally responsive and developmentally appropriate child care and early childhood education in Washington State”. The CCCC serves in an advisory capacity to the lead agency and other administering agencies that provide services under the Child Care Development Fund.

In the fall of 2002, to ensure that the CCCC can work efficiently and effectively to achieve its mission, the CCCC voted to task the Systems subcommittee with

development of proposed coordination goals for the CCCC over the next 3-5 years as well as a recommended structure to enable the CCCC to accomplish those goals.

With this work underway in the systems subcommittee, a consultant was hired to facilitate the process. As a member of the Systems subcommittee, the Governor's Head Start-State Collaboration Office (GHS-SCO) stepped forward with supplemental grant funds to support the Systems subcommittee's initiative to explore/rethink the CCCC current vision and structure.

(b) Coordination is also maintained with other groups:

- (1) Resource and Referral Agencies. This plan includes funding operating costs for resource and referral. Resource and referral agencies play an active role in coordinating and developing child care services at the local community level under contracts with the lead agency. (See Attachment 4, *Child Care Resource and Referral Network Roster*)**
- (2) DSHS Child Care Programs. DSHS administers child care subsidies for low income non-TANF families, child care related to protective services and alcohol/substance abuse, and families served through TANF programs and the Seasonal Child Care program. DSHS administers child care licensing, as well as planning and development activities such as resource and referral and consumer education. Coordination among these programs is achieved through monthly meetings of the DSHS Internal Child Care Coordinating Committee (ICCCC). (See Attachment 5, *ICCCC Roster*)**
- (3) Ad hoc committees. These committees are comprised of community representatives and are convened as necessary to develop programs and program changes required to meet CCDF rules. During April and May 2003, DCCEL held 17 Family Home Child Care public forums throughout the state to gather input into the Washington Administrative Code (WAC) revision process. Chapter 388-155 WAC for family child day care homes are the minimum licensing requirements (MLRs) for family child care homes. Providers had opportunity to discuss areas for improvement and to discuss outcomes of the 2001 family home survey. Forums were held in Richland, Sunnyside, Wenatchee, Seattle, Bellevue, Kent, Bremerton, Spokane, Vancouver, Mt. Vernon, Yakima, Tacoma, Port Angeles, Tumwater and Everett. Three additional forums were held in Spanish in the cities of Sunnyside, Richland and Wenatchee.**
- (4) Washington Association for the Education of Young Children (WAEYC). WAEYC manages the training, scholarship and provider services component of the Washington State Training And Registry System (Washington STARS). STARS is a statewide training initiative responsible for coordinating the required basic 20 hour training and the annual 10 hour training offered throughout the state in a variety of venues. This coordination includes**

approving processes for training, trainers and training organizations and tracking training and awarding scholarships.

- (5) ECEAP AND HEADSTART.** ECEAP and Head Start closely coordinate policy development to ensure consistency for dually-funded Head Start and ECEAP providers and coordinate the allocation of early childhood funds. ECEAP and Head Start are represented on the CCCC. Also the CCCC and DCCEL are actively involved in the Governor's Head Start Collaboration Project.
- (6) The Governor's Head Start-State Collaboration Office (GHS-SCO),** funded through a grant from the Head Start Bureau, serves as a single point of contact for both state agencies and local Head Start programs, informing all stakeholders of current services, policies and initiatives and to identify opportunities for improvements for services to low-income families and children. Additionally, the purpose of the GHS-SCO is to support the development of multi-agency and public/private partnerships at the State level to enhance the capacity of Head Start and other early childhood programs to improve outcomes and opportunities for children and families in Washington State by:
- **Helping to build early childhood systems and enhance access to comprehensive services and support for all low-income children;**
 - **Encouraging widespread collaboration between Head Start and other appropriate programs, services, and initiatives, augmenting Head start's capacity to be a partner in State initiatives on behalf of children and their families; and**
 - **Facilitating the involvement of Head Start in state policies, plans, processes and decisions affecting Head Start target population and other low-income families.**
- (7) DCCEL** has developed public-private partnerships with businesses and philanthropic organizations in the state to increase public awareness of the need for high-quality, affordable child care in Washington, to increase the number of employer-supported child care facilities in Washington, to address systemic issues that cut across services and to increase the availability of capital funds for child care facilities.

The Governor's Commission on Early Learning was established and convened in 1998 by Governor Gary Lock. This commission, comprised of business leaders, community organization representatives, parents and child care experts, developed a statewide public information campaign on the importance of the child's first three years of life and how parents and caregivers can help babies learn. This commission also assisted in the replication of the Teacher Education and Compensation Helps (T.E.A.C.H.) Early Childhood ® Washington Program and in the creation of The Foundation for Early Learning, a public charitable foundation. (This Foundation raises private funds to help support T.E.A.C.H. and to support parent education programs in Washington).

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- (8) DCCEL has contracted with the state's Department of Community Trade and Economic Development (DCTED) to manage a statewide Child Care Facility Fund that provides low interest loan and grants to employers and child care providers interested in developing a new child care business or expanding their existing business. This fund has resulted in the expansion of employer-supported child care facilities for their employees, and in the availability of increased access through licensed child care centers and family homes.**
- (9) DCCEL has also contracted with DCTED to manage a Child Care Micro Loan program. This program distributed almost \$1,000,000 to five lending institutions throughout the state to provide small, below market rate loans to child care providers to help them start or expand their businesses. The local lenders have raised additional funds from local and national banks to support the Child Micro Loan program.**

Outcomes of this coordination included the development of program initiatives that enhance our child care system. Examples include:

- **A program implemented by State and Local Health Departments that focuses on health and development consultation for providers,**
- **A program implemented by the Resource and Referral Network that engaged local providers in quality enhancement activities by providing technical assistance, resources and training,**
- **The development of the Washington STARS program, which established a statewide career development system, and maintains a registry to track training records and a website for training opportunities.**

Additional outcomes include an increase in the number of full-day/full-year Head Start and ECEAP programs, better linkage of school-age programs with the Department of Education initiatives such as the 21st Century Learning Centers, and joint conferencing linking family support and child care with the business community.

PART 3 -- CHILD CARE SERVICES OFFERED

Section 3.1 - Description of Child Care Services

REMINDER: The Lead Agency must offer certificates for services funded under 45 CFR 98.50. (98.30) Certificates must permit parents to choose from a variety of child care categories, including center-based care, group home care, family child care and in-home care. (§98.30(e))

3.1.1 In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?

☒ No.

☐ Yes, and the following describes the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

3.1.2 The Lead Agency must allow for in-home care but may limit its use. Does the Lead Agency limit the use of in-home care in any way?

☐ No.

☒ Yes, and the limits and the reasons for those limits are (§§98.16(g)(2), 98.30(e)(1)(iv)):

The lead agency does not allow in-home care for Seasonal Child Care because this service is primarily for the migrant population. Most of this population lives in sub-standard housing and the lead agency would not be able to ensure the health and safety of the children. Seasonal Child Care is the only program with this limitation.

3.1.3 Are all of the child care services described in 3.1.1 above (including certificates) offered throughout the State? (658E(a), §98.16(g)(3))

☐ Yes

☒ No, and the following are the localities (political subdivisions) and the services that are not offered:

The Seasonal Child Care program is not offered in the northeastern corner of the state nor in western Washington, except for Skagit and Whatcom Counties.

Section 3.2 - Payment Rates for the Provision of Child Care

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care. These rates are provided as Attachment (6). **The attached payment rates were phased-in over a period of six months, January 1 - June 30, 2002.**

The rates are the maximum amounts the state will pay for child care in each rate category. The rates established in January 2002 were at the "58th percentile", which means the rates were set so that 58% of child care slots statewide as of the time of the 2000 market rate survey would have been available to subsidized families at the provider's usual rate.

Washington State does not have a waiting list for child care subsidies—all eligible families who apply are offered subsidies. Washington State sets its percentile based on a forecast of the child care caseload in combination with the amount of monies budgeted for child care subsidies and the market rate survey.

The following is a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

- The month and year when the local market rate survey(s) was completed: **April – June, 2002**. (§98.43(b)(2)) A copy of the Market Rate Survey and the results of the survey are provided as Attachment (7).

In the spring of 2002, DSHS contracted with the Social and Economic Services Research Center (SESRC) of Washington State University to conduct a survey of: 1) child care centers and (2) licensed family child care homes. They attempted to call all 2,147 child care centers and a stratified random sample of 27% of child care family homes (2,005 out of 7,309).

The attachment indicates the percentile that the current subsidy rates represented at the time of the 2002 survey.

- How the payment rates are adequate to ensure equal access based on the results of the above noted local market rate survey (i.e., the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

Washington State attempts to ensure equal access by making the same proportion of slots available to families regardless of where they live in the state, the age of their children, and the type of care that they choose (center vs. family home). Subsidy rates are set for four age groups (infants, toddlers, preschoolers, and school-age

children) and two types of providers (centers and licensed family homes) in each of six DSHS Regions.

Some DSHS Regions cover large geographical areas and providers expressed concern, at the last round of rate setting, that the DSHS rates in some counties were too low. The amount of the market that the proposed DSHS rates would buy in each county was analyzed and four counties were identified as needing special treatment. These counties were then assigned center rates based on the DSHS Region they most closely resembled; no need for special treatment for family home rates was identified.

- Additional facts that the Lead Agency relies on to determine that its payment rates ensure equal access include: (§98.43(d))

We investigated the access that Washington State's subsidy rates provide to licensed care in family homes and centers. Washington State sets subsidy rates based on the prices charged full-time private pay children. For this analysis, we considered all slots filled by children paying less than the DSHS subsidy rates to be accessible to parents wanting to use subsidies to pay for child care. (While some slots at below the subsidy rates may not be accessible because the provider will not accept subsidy payments, it is not the subsidy rate that is preventing access.) In addition, all slots filled by subsidized children are considered to be accessible to parents paying with subsidies, regardless of the amount that the providers charge private pay children. Using this logic, we used the 2002 Market Rate Survey to estimate access provided by DSHS subsidy rates.

Three groups of children were identified:

1. Subsidized children. All children using subsidies at the time of the market rate survey had access to care at DSHS rates, regardless of the rate that the provider charged private pay children.
2. Private Pay children with providers charging the DSHS rate or less. While some of these providers may not be willing to serve DSHS children, the DSHS rate is sufficient to provide access to these slots for subsidized children.
3. Private Pay children with providers charging more than the DSHS rate. While providers might have been willing to fill some of these slots or vacancies with DSHS subsidized children, we assumed that DSHS rates were not sufficient to assure access to these slots.

For the first two groups, subsidy rates are sufficient to provide access to subsidized child care. The third group represents the portion of the child care market inaccessible to families using subsidies to pay for child care.

Slightly different strategies had to be used to come up with estimates for licensed family homes and child care centers. For licensed family homes, Washington collects

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

information on the pay status and payments for each individual child. Subsidy rates are set using information on full-time children that are not receiving child care subsidies. For centers, Washington State sets subsidy rates with data from those centers that have less than 85% of their children in the subsidy program. In calculating estimates for access in centers, we assumed that the percent subsidized was not age sensitive, in other words if 30% of all children in a center were subsidized by DSHS then we assumed that 30% of children in each age category were subsidized by DSHS.

The 2002 Market Rate Survey was used to generate estimates of the access provided by DSHS subsidy rates to licensed care in child care centers. The following table displays those estimates for children in full-time care. At the time of the 2002 Market Rate Survey, approximately 22,148 full-time children in centers were subsidized by DSHS (Column A in Table 1). In addition, our rates were high enough to provide access to an additional 13,655 private pay full-time slots where the children were not charged more than the DSHS rates (Column B in Table 1). But 25,594 or 42% of all full-time children were not subsidized and were paying more than the DSHS rates (Column C in Table 1). Thus, at the time of the 2002 Market Rate Survey, DSHS rates provided access to approximately 58% of all full-time slots in child care centers (36.1%+22.2%).

Table 1. Licensed Child Care Centers: Access to Full-time Care Provided by DSHS Rates at the time of the 2002 Market Rate Survey

	Subsidized (A)	Private Pay		Total (A+B+C)	Number with Access to Care at DSHS Rates (A+B)	Percent with Access to Care at DSHS Rates (A+B)/(A+B+C)
		At or Below DSHS Rates (B)	Above DSHS Rates (C)			
Infants	1,512	783	1,541	3,836	2,295	59.8%
Toddlers	5,424	2,574	5,462	13,460	7,998	59.4%
Pre-School	11,302	6,595	15,157	33,053	17,896	54.1%
School-age	3,911	3,704	3,434	11,048	7,614	68.9%
Overall	22,148	13,655	25,594	61,397	35,803	58.3%
Percent of Total	(36.1%)	(22.2%)	(41.7%)	(100.0%)		

The next table estimates the number of full-time children in licensed homes by their subsidy status and provider rates. At the time of the 2002 Market Rate Survey, approximately 13,147 full-time children in licensed family homes were subsidized by DSHS (Column A in Table 2). In addition, our rates were high enough to provide access to an additional 5,516 private pay full-time slots where the children were not charged more than the DSHS rates (Column B in Table 2). Only 9,726 or 34% of all full-time children were not subsidized and were paying more than the DSHS rates

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

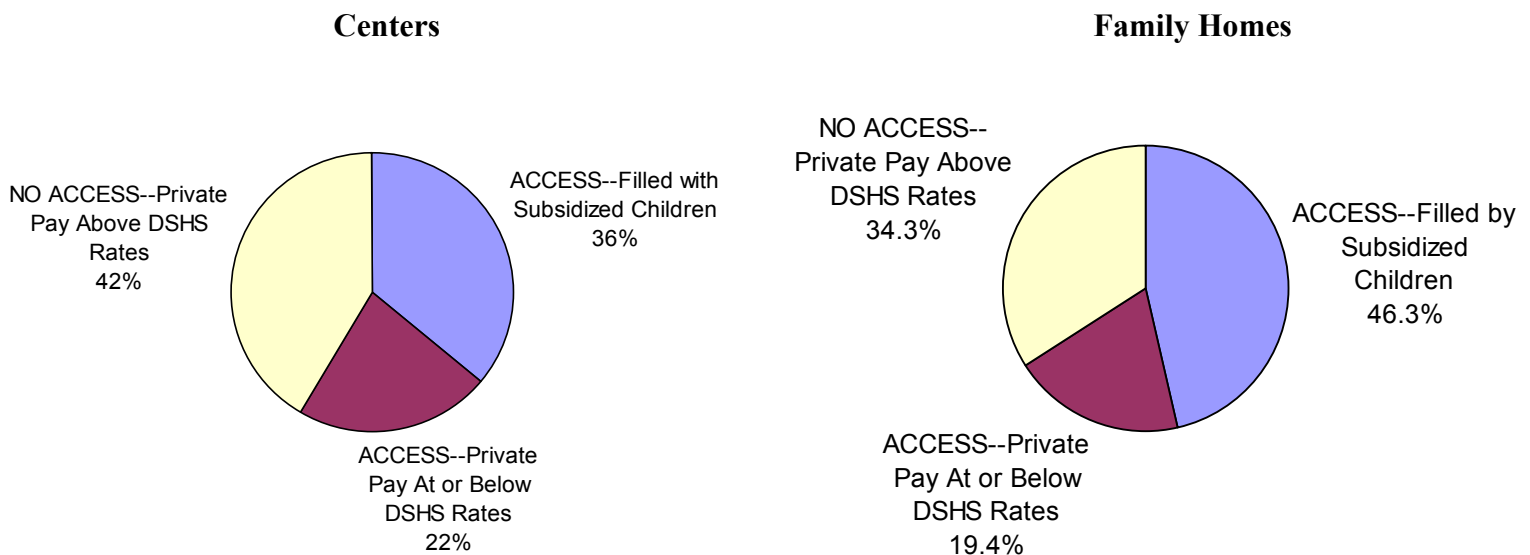
(Column C in Table 2). Thus, at the time of the 2002 Market Rate Survey, DSHS rates provided access to approximately 66% of all full-time slots (46.3%+19.4%).

Table 2. Licensed Family Homes: Access to Full-time Care Provided by DSHS Rates at the time of the 2002 Market Rate Survey

	Subsidized (A)	Private Pay		Total (A+B+C)	Number with Access to Care at DSHS Rates (A+B)	Percent with Access to Care at DSHS Rates (A+B)/(A+B+C)
		At or Below DSHS Rates (B)	Above DSHS Rates (C)			
Infants	1,083	394	643	2,120	1,477	69.7%
Toddlers	2,935	1,297	2,305	6,537	4,232	64.7%
Pre-School	5,362	2,738	4,467	12,567	8,100	64.5%
School-age	3,767	1,087	2,311	7,165	4,854	67.7%
Overall	13,147	5,516	9,726	28,389	18,663	65.7%
Percent of Total	(46.3%)	(19.4%)	(34.3%)	(100%)		

Below are pie charts summarizing access to full-time care provided by DSHS rates.

Figure 1. Access to Full-Time Care Provided by DSHS Subsidy Rates at the time of the 2002 Market Rate Survey



STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

- If the payment rates do not reflect individual rates for the full range of providers -- center-based, group home, family and in-home care -- explain how the choice of the full range of providers is made available to parents.

The lead agency has no payment rates for “group homes” because this is not a licensed category in the state for child care. The lead agency sets maximum payment rates for licensed centers, family child care homes, care in the child’s home and in the home of the relative provider.

Licensed/certified providers receive a \$250 infant bonus when they accept an infant (under 12 months old) into their care. The provider must care for the infant five or more days and may only receive one bonus per infant.

An additional rate is available for “special needs” care. The special needs diagnosis, and the need for an additional level of care must be determined and documented by a registered nurse or a health, mental health, education or social service professional with at least a Master’s degree. DSHS has a standard special needs rate that can be paid in addition to the regular rate for that child, or an additional amount may be paid if documented costs for care are made available by the child care provider.

Section 3.3 - Eligibility Criteria for Child Care

By statute, all eligible children must be under the age of 13, or under age 19 if physically or mentally incapable of self-care, or under court supervision, and reside with a family whose income does not exceed 85% of the State Median Income (SMI) for a family of the same size and whose parent(s) are working or attending a job training or educational program or who receive or need to receive protective services. (658E(c)(3)(B), 658P(3), §98.20(a))

- 3.3.1 Complete column (a) in the matrix below. Complete Column (b) ONLY IF the Lead Agency is using income eligibility limits lower than 85% of the SMI).

Family Size	(a) 85% of State Median Income (SMI) (\$/month) calendar year 2003	IF APPLICABLE	
		(b) Income Level, lower than 85% of SMI, if used to limit eligibility	
		\$/month	% of SMI
1	2,365	1,496	53.8
2	3,093	2,020	55.5
3	3,821	2,544	56.6
4	4,548	3,066	57.3
5	5,276	3,590	58.2

The Lead Agency uses the State Median Income (SMI) of the year 2003.

Washington State calculates a state median income for each calendar year. The method uses the median income for a family of four for the federal fiscal year published by ACF. It then adjusts upward for inflation to compensate for the three month difference between fiscal and calendar years.

- 3.3.2 How does the Lead Agency define “income” for the purposes of eligibility? Is any income deducted or excluded from total family income, for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments? Is the income of all family members included, or is the income of certain family members living in the household excluded? Please describe and/or include information as Attachment 8. (§§98.16(g)(5), 98.20(b))

“Income” means any appreciable gain in real or personal property (cash or in-kind) received by a client during the month for which eligibility is determined, and that can be applied toward the needs of the assistance unit. (See Attachment 8, definition of terms according to WAC 388-22-030.)

Working Connections Child Care counts the following as income when determining WCCC eligibility and copayment, as per WAC 388-290-0060:

- (1) A TANF grant, except when exempt under WAC 388-290-0070(9);**
- (2) Child support payments;**
- (3) Supplemental Security Income (SSI);**
- (4) Other Social Security payments, such as SSA and SSDI;**
- (5) Refugee assistance payments;**
- (6) Payments from the Veterans' Administration, disability payments, or payments from labor and industries (L&I);**
- (7) Unemployment compensation;**
- (8) Other types of income not listed in WAC 388-290-0070;**
- (9) Wages from employment or self-employment. "Self-employment income" means gross income from self-employment minus allowable business expenses in WAC 388-450-0085; and**
- (10) Lump sums as money you get from a one-time payment such as back child support, an inheritance, or gambling winnings.**

The Co-pay Calculation Table effective April 1, 2003, is included as Attachment 9.

- 3.3.3 Has the Lead Agency established additional eligibility conditions or priority rules, for example, income limits that vary in different parts of the State, special eligibility for families receiving TANF, or eligibility that differs for families that include a child with special needs? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

() No

(X) Yes, and the additional eligibility criteria are: (Terms must be defined in Appendix 2)

According to WAC 388-290-0015 “family” in WCCC means one or more individuals who live together in the same household. The following describes how these individuals can be included in family size:

If the individuals living in the household are:	Then include the following members in WCCC family size:
Married parents	Both parents and all their minor children living in the household
Unmarried parents that have at least one mutual child	Both parents and all their minor children living in the household
Unmarried parents with no mutual children	Each parent and his/her respective child(ren) separate from the other parent and his/her child(ren)
Child(ren) related by blood, marriage, or adoption who live with a WCCC consumer who is not legally and financially responsible for the child(ren)	Only the related children
Child(ren) not related by blood, marriage, or adoption who live with a WCCC consumer who is not legally and financially responsible for the child(ren)	Each unrelated child is considered a separate family
A minor parent residing with his/her parent(s)	The minor parent and his/her child(ren)

In addition, the TANF grant is not counted for the first three months of employment to allow families time for successful transition to work employment.

The following income is exempted by the department when figuring income eligibility and co-payments, per WAC 388-290-0070:

- (1) The WCCC program does not count the following income types when figuring income eligibility and copayment:**
 - (a) Income types as defined in WAC [388-450-0035](#), [388-450-0040](#), and [388-450-0055](#);**
 - (b) Compensatory awards, such as an insurance settlement or court-ordered payment for personal injury, damage, or loss of property;**
 - (c) Adoption support assistance and foster care payments;**
 - (d) Reimbursements, such as an income tax refund;**
 - (e) Diversion cash assistance and the early exit bonus;**

Effective Date: October 1, 2003 26

Amended Effective: _____

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

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- (f) Income in-kind, such as working for rent;
 - (g) Military housing and food allowance;
 - (h) The TANF grant for the first three consecutive calendar months after the start of a new job. The first calendar month is the month in which the job starts;
 - (i) Payments to you by your employer for benefits such as medical plans;
 - (j) Earned income of a WCCC family member defined under WAC [388-290-0015](#)(2)
- (2) WCCC deducts the amount paid for child support under court order, division of child support administrative order, or tribal government order, from other income types when figuring eligibility and co-pay for the WCCC program.

(See Attachment 10, WAC 388-450-0035 for educational benefits, WAC 388-450-0040 for Native American benefits and payments, WAC 388-450-0055 for assistance from other agencies and organizations, and WAC 388-290-0015 for what makes up a family in the WCCC program).

- 3.3.4 Has the Lead Agency elected to waive, on a case-by-case basis, the fee and income eligibility requirements for cases in which children receive, or need to receive, protective services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))
- ☐ Not Applicable, CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.
- ☐ No
- ☒ Yes
- 3.3.5 Does the Lead Agency allow child care for children above age 13 but below age 19 who are physically and/or mentally incapable of self-care? (Physical and mental incapacity must then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))
- ☐ No
- ☒ Yes, and the upper age is up to the child's 19th birthday.
- 3.3.6 Does the Lead Agency allow child care for children above age 13 but below age 19 who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))
- ☐ No
- ☒ Yes, and the upper age is up to the child's 19th birthday.
- 3.3.7 Does the State choose to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7))
- ☒ Yes. (NOTE: This means that for CCDF purposes the State considers these children to be in protective services.)

☐ No.

3.3.8 Does the State choose to provide respite child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

☒ Yes.

☐ No.

Section 3.4 Priorities for Children

3.4.1 The following describes the priorities for serving CCDF-eligible children including how statutorily required priority is given to children of families with very low family income and children with special needs: (Terms must be defined in Appendix 2) (658E(c)(3)(B))

Currently, there is not a waiting list for child care services in the State of Washington, although there is occasionally a waiting list for the Seasonal Child Care Program. When waiting lists are necessary, our contingency plan is to place children from very low income families and children with special needs on a priority waiting list. Families on the priority waiting list will be served before authorizations are made off the non-priority waiting list.

Families are considered very low income if they are at or below 82% of the Federal Poverty Level and/or receiving TANF. Documentation for a special needs child is not necessary for placement on the priority list but is required to receive authorization for a child care subsidy. Documentation for the child's special need and additional level of care must be made by a health, mental health, education, or social service professional with at least a Master's degree, or by a registered nurse.

3.4.2 The following describes how CCDF funds will be used to meet the needs of families who are receiving Temporary Assistance for Needy Families (TANF), families who are attempting through work activities to transition off of TANF, and families that are at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

Under Washington State's welfare reform "Workfirst" legislation, an integrated child care subsidy program, Working Connections Child Care, went into effect July 1997. Child care services are administered by the Washington State Department of Social and Health Services, Economic Services Administration, Division of Child Care and Early Learning.

All income-eligible families (gross income minus child support paid out and at or below 200% of the federal poverty level adjusted for family size) who are participating with children under 13, or under 19 if a special needs

child, regardless of their source of income, (whether TANF, employment, or a combination) are eligible for subsidized child care services with a co-payment. Preference is no longer given to families due to TANF status. Rather, the goal is to support employment for all eligible low-income families. Approximately 91% of CCDF funds are spent on child care subsidies for this population. These services are delivered through the individual welfare office, or Community Services Offices (CSOs). The monthly co-payment is made by the parent directly to the provider.

TANF families who are awaiting approval of TANF eligibility who are ready for immediate job search, may be authorized child care benefits while their application is pending. These families complete a child care application and have the qualified provider of their choice complete the provider information form. Child care is authorized if the TANF application is approved. If found to be ineligible for TANF, child care benefits stop.

Families receiving Food Stamp benefits who are required to participate in Food Stamp Employment and Training activities (FS E&T), are eligible for child care for work activities if they complete the WCCC application and meet the FS E&T Program requirements.

Protective Services Child Care is provided through DSHS, Children's Administration.

- 3.4.3 The following describes how the Lead Agency addresses situations in which funding is not sufficient to serve all families that are technically eligible under State policies:

When funding issues have arisen, we have made adjustments to the income eligibility level (i.e., decreased the eligibility level from 225% FPL to 200% FPL), increased family copayments, and discontinued "add-on" benefits such as the non-standard hour bonus.

Section 3.5 - Sliding Fee Scale for Child Care Services

- 3.5.1 A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on income and the size of the family. A copy of this sliding fee scale for child care services and an explanation of how it works is provided as Attachment 9.

Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

() No.

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

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- ☒ (X) Yes, and the following describes any additional factors that will be used to determine a family's contribution including, but not limited to, a maximum amount (family cap), number of children in care, cost of care, and/or whether care is full or part-time:

Co-payments may be waived on a case by case basis for children in protective services within Children's Administration Child Care Subsidy programs.

3.5.2 Is the same sliding fee scale provided in the attachment in response to question 3.5.1 above in use in all parts of the State? (658E(c)(3)(B))

- ☒ (X) Yes
☐ () No, and other scale(s) are provided as Attachment ____.

3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: \$1,272.
(See attachment 11, Federal Poverty Level Chart 2003)

The Lead Agency must elect ONE of these options:

- ☐ () ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
☐ () ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
☒ (X) SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. A description of these families is:

Protective Services Child Care is provided through DSHS, Children's Administration. All children receiving child care through Children's Administration are receiving protective services. Co-payments may be waived on a case by case basis. For children in protective services and placed outside their home (or who are in out of home care) no co-pay will be assessed.

3.5.4 Does the Lead Agency have a policy that prohibits child care providers from charging families any unsubsidized portion of the providers' normal fees (in addition to the contributions discussed in 3.5.1)? (§98.43(b)(3))

- ☐ () No
☒ (X) Yes, please describe:

Effective Date: October 1, 2003 30

Amended Effective: _____

Child Care providers who accept children authorized for subsidized child care are prohibited from charging families the difference between the subsidy rate and the provider's rate for the normal daily child care. Providers may charge subsidized parents for additional services such as care for non-approved activities (shopping, movies, etc.), optional enrichment programs, optional lunch program, care for a child picked up after normal operating hours, or late fees for a copayment paid past the agreed upon date. (See Attachment 12, *Child Care Subsidies/A booklet for Licensed and Certified Providers (DSHS 22-877(X) (Rev. 1/01)*).

- 3.5.5 The following is an explanation of how the copayments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

In April 2003 Washington State changed its co-pay schedule, increasing co-pays for all families except those in the lowest income category by \$25 dollars. Co-pays for families with incomes below 83% FPL were maintained at \$15 per family per month. All families with incomes below 164% FPL have co-pays of less than 10% of countable income. Indeed, almost all families with incomes below 137.5% FPL have co-pays below 5% of countable income. Eligibility for child care subsidies is cut-off at 200% FPL at which point co-pays amount to about 15% of a family's countable income.

Section 3.6 - Certificate Payment System

A child care certificate means a certificate, check, or other disbursement that is issued by the Lead Agency directly to a parent who may use it only to pay for child care services from a variety of providers including community and faith-based providers (center-based, group home, family and in-home child care), or, if required, as a deposit for services. (658E(c)(2)(A)), 658P(2), §§98.2, 98.16(k), 98.30(c)(3) & (e)(1))

Describe the overall child care certificate payment process, including, at a minimum:

- 3.6.1 A description of the form of the certificate: (§98.16(k))

As part of the award letter given to the parent after eligibility determination, documents are generated indicating the maximum amount of child care for which the family is eligible, the dates of that eligibility, and the activity the child care is supporting. In addition, the parents and the provider complete a provider information form that collects the pertinent information needed to make payment to the provider. (See Attachment 13, *WCCC Award/Change Letter (DSHS 07-066(REV. 05/2000)* and Attachment 14, *In Home Relative Provider Letter, DSHS 07-075 (REV. 03/2002)*).

- 3.6.2 A description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to the choice of provider: (658E(c)(2)(A)(iii), 658P(2), §§98.2, 98.30(c)(4) & (e)(1) & (2))

Parents may choose from all licensed or certified child care facilities (including centers and homes) or a relative/in-home care provider who meets the program's guidelines. Under CCDF, child care information is provided to families in the form of a pamphlet, *Child Care Subsidies & Early Childhood Education Options In Washington State*. Parents who need help in selecting a child care provider, are referred to the local Child Care Resource and Referral agency. (See Attachment 15, *Child Care Subsidies & Early Childhood Education Options In Washington State (DSHS 22-859(X) (Rev. 12/02)*)

Note: If a parent chooses to use child care subsidies in a bordering state, the child care facility must meet that bordering state's licensing or certification rules.

When a child who is in care or custody of Washington State qualifies for Children's Administration child care subsidy programs and needs child care in another state, Washington will authorize care consistent with the state's CCDF child care subsidy policies and the Interstate Compact Agreement for Child Welfare Agencies.

When a child qualifies for Working Connections Child Care (WCCC) Program and needs child care in another state, WCCC will authorize care to a provider who meets that other state's licensing regulations. WCCC will pay the lead agency's maximum child care subsidy rate based on the child's age and region where the family lives or the provider's rate, whichever is less.

- 3.6.3 If the Lead Agency is also providing child care services through grants and contracts, explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (§98.30(a) & (b))

Parents are notified of their choice to access ECEAP services if they are income eligible. Parents who access ECEAP services will be referred to the local DSHS office and resource and referral organization if they are in need of additional child care.

Parents who meet income and program guidelines for the Seasonal Child Care Program are given information about the types of licensed child care available to them. The local resource and referral agency may be contacted for child care referrals that meet the family's needs. The parents make the

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

selection. The Seasonal Child Care Program is offered in Yakima, Kittitas, Benton, Franklin, Walla Walla, Adams, Grant, Douglas, Chelan, Skagit, and Whatcom Counties. The amount of child care services available through this program is limited to \$7,751,848 per year.

PART 4 -- PROCESSES WITH PARENTS

- 4.1 The following describes the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). If the process varies for families based on eligibility category, for instance, TANF versus non-TANF, please describe. The description should include:
- How parents are informed of the availability of child care services and about child care options;
 - Where/how applications are made;
 - Who makes the eligibility determination;
 - How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4; and
 - Length of eligibility period including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs.
 - Any steps the State has taken to reduce barriers to initial and continuing eligibility for child care subsidies.
- **Parents receive information about the WCCC program (and other child care subsidies available through a continuum of services) through their local DSHS office, resource and referral agency, child care provider, assigned Division of Child and Family Services Social Worker, Seasonal Child Care contractors, or other community agencies. Posters and brochures are available in six languages that publicize the availability of these services. Parents are informed of their options through DSHS workers (during WorkFirst Orientation, by Employment Security workers when entering WorkFirst Job Search), resource and referral agencies, brochures and child care providers (including ECEAP, HeadStart and Seasonal). (See Attachment 16, *Seasonal Agricultural Workers! Do you work in fields, orchards or packing sheds?*) (DSHS 22-330)(X) Rev. (5/00)**
 - **Potentially eligible families requesting child care benefits are screened at their initial eligibility interview. They are given a Working Connections Child Care (WCCC) application and referred to the appropriate agency staff, or an application is taken over the phone. As part of the application, the provider information form is taken to the provider of choice by the parent, and completed by the provider indicating the provider's availability and cost of care. Based on the completed application and verified income, Community Service Office (CSO) staff, or contractor (in the case of Seasonal Child Care) determine eligibility and calculate the family's co-payment as it applies. The award letter is generated to the parent stating the eligibility period, the amount of care, the amount of the monthly co-payment, and the activity covered by the child care. The parent may take this form to the**

provider of choice as an assurance of the family's eligibility. The computerized letter generated by the DSHS voucher payment system serves as written authorization to the provider, as well as written verification to the client. Authorizations are for a maximum of six months. All families have co-payments reviewed periodically in accordance with the Department's written requirements.

- Applications for Working Connections Child Care services are made through local DSHS offices, following the process stated above. A voucher system is used which authorizes care to the provider of the parents' choice. Once the authorization is entered into the payment system, the provider (or parent in the case of in-home care) receives an invoice at the end of each month for verification of services and signature. This is returned to DSHS, Social Service Payment system, triggering issuance of a check by the 10th of the month. A family who receives TANF benefits are informed about the exception to individual penalties associated with a work requirement, described in 4.4, by the client's WorkFirst casemanagers when they develop the client's Individual Responsibility Plan.
- Applications for the Seasonal Child Care program are made through contracted agencies. These contractors authorize services based on eligibility criteria that is established by DSHS, performing a similar process as described above. Parents select their choice of a licensed or certified provider. The authorization is entered into the DSHS Social Service Payment system which issues the check directly to the provider upon receipt of their signed verification of services provided.
- Applications for ECEAP services are available through the local DSHS office. Parents are notified of their opportunity to access ECEAP services if they are income eligible. If they are in need of full-day child care, they may also access the WCCC program. WCCC eligibility requirements and rules take precedence when a family has a child enrolled in a "blended HeadStart/ECEAP site" (one that is also a licensed child care center or home). The family must meet WCCC income guidelines and the provider must be licensed or certified. The amount of care authorized is based on the parent and child's schedule (no longer than six months). The families on-going eligibility is based on WCCC criteria. All WCCC children are authorized a full-day of care when the need is for five (5) hours or more a day or one hundred ten (110) hours or more a month.
- Children's Administration has a distinct service system that bases all services on the health and safety of the child. The Services are provided through the implementation of an Individual Service and Safety Plan (ISSP). The ISSP outlines what services will be provided to support the child's health and safety. The child's assigned social worker is responsible for each child's plan. Child care is an identified service by the social worker when needed for the health or safety of the child.

- The Community Services Division (CSD), in response to client request for phone access to workers and an ability to complete transactions or receive information without going into an office, created Customer Service Centers in all six regions of the state. Three models currently exist: 1) virtual: staff are in the local Community Service Offices (CSO) and connected by phone; 2) centralized: staff are in one regional site; 3) CSO based: staff are in the CSO. Customer Service Centers are designed to simplify the process of accessing services. Customers can call one local number to learn about all available CSD services, get child care services and/or medical assistance, and report changes for all programs. Customer satisfaction surveys will be used to assess service delivery. By November 2003, customers will be able to access all these services by simply calling The Answer Phone. The caller will be directed to the appropriate call center.
- The e-Child Care project is a multi-year project working to leverage today's advanced technologies to simplify processes like enrollment, attendance tracking, and payment processing for the child care subsidy program. The project supports DSHS' ability to subsidize and ensure quality child care services by applying automation that streamlines business processes for WCCC and child care providers. The project impacts three business processes:

Public Access - Enrollment and authorization component

An interactive Internet component, so parents may apply for child care subsidies and providers may verify the application or payment status of children in their care.

Client Record Management – Processing component

The case management component will streamline according to the needs of child care authorizing workers. We're working towards interfacing vital data to compliment case tracking and audits.

Payment Process - Attendance-tracking and Payment components

WCCC payments to child care providers are based upon children's actual attendance. The project is working to help child care providers track and report children's attendance using an automated modern approach. The e-Child Care project is working on new subsidy payment capabilities such as:

- Allowing workers to easily change and correct the payment information;
- Making payment to providers more frequently; and
- Making payment that accurately reflects the child care provided.

4.2 The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding

such parental complaints available to the public on request. (658E(c)(2)(C), §98.32))

DSHS maintains a record of complaints (from parents and others) in DSHS/ Children's Administration's (CA) automated Case and Management Information System (CAMIS). Complaints are received, categorized, and forwarded by CA Intake staff to be investigated by the DCCEL licensor or Child Protection Services (CPS) investigators, as appropriate.. The outcome of licensing and/or CPS investigations is entered into CAMIS, as "founded", "unfounded" or "inconclusive" (CPS allegations) or "valid", "invalid", or "inconclusive" (licensing allegations). Complaint outcome information is available to parents and the public on request by telephoning DCCEL's Licensed Child Care Information line, or the facility's licensor. Parents and the public can also request public disclosure of licensing files to obtain written information. This includes information about complaint receipt and outcomes.

The Licensed Child Care Information line (1-866-48-CHECK) is available for parents who want to gain information about the licensed status of their child care provider. Basic information is provided about capacity, ages of children served, and the length of time a provider has been licensed. Parents can also obtain information on whether a home or center has been revoked or suspended or is in summary suspension, as well as if the home or center has any founded Children's Protective Services complaints.

A child care complaint brochure is available that explains what happens when child care complaints are registered with the Children's Administration Intake office and how decisions are made to determine if the complaint is investigated by CPS or DCCEL. This brochure explains the investigation process and the follow up procedures conducted after the investigation is completed. (See Attachment 17, *Child Care Complaint Process-What happens when there is a complaint about a Child Care Home or Center?* DSHS 22-159(X)(6/98)).

A proposed new WAC (388-295-7040), expected to become effective in August 2003, will require child providers to make licensing information available on site for parents to review. This includes copies of the most recent child care center checklist for licensing renewal, the most recent child care center monitoring checklist, and facility licensing compliance agreements for any deficiencies noted.

- 4.3 The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))

Written in the Washington State Code (WAC 388-150-170(2)(e), 388-155-170(2)(e) is the following directive to each child day care center and family home licensee:

“The licensee shall give the parent the following written policy and procedure information: Permission for free access by the child’s parent to all center (home) areas used by the child.”

This information is found in the booklets that are given to child care providers:

- **Minimum Licensing Requirements for Child Day Care Centers,**
- **Minimum Licensing Requirements for Family Child Day Care Homes, and**
- **Minimum Licensing Requirements for Child Day Care Centers Caring Exclusively for School-Age Children.**

Note: An exemption to parents having unlimited access to their children while in child care with a provider who receives CCDF funds is necessary for children in protective services. Many of the children in protective services have court orders outlining parental contact. These court orders would supersede the need for providers who receive CCDF funds to allow parents unlimited access to their children when the children are receiving protective services child care.

- 4.4 The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care:

NOTE: The TANF agency, not the Child Care Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. The TANF agency that established these criteria or definitions is: **Washington State Department of Social and Health Services.**

- **"appropriate child care": means licensed, certified or approved under state laws and regulations that apply to the type of child care you use, and that you may make your own choice among child care options that are available in your area.**

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

- **"reasonable distance": means that you can reach the child care site without travel that exceeds normal expectations in your community.**
- **"unsuitability of informal child care": By implication, anything that is not allowable as a reimbursable child care option as defined in WAC 388-290-0125 would constitute unsuitable informal child care and could not be reimbursed with CCDF funding.**
- **"affordable child care arrangements": means at or below your share of the child care costs ("co-payment") calculated by the Working Connections Child Care Program.**

**PART 5 -- ACTIVITIES & SERVICES TO IMPROVE
THE QUALITY AND AVAILABILITY OF CHILD CARE**

5.1 - Quality Earmarks and Set-Asides

- 5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; and describes the expected results of the activities.

Infants and toddlers:

Washington State has focused on recent research on infant and child brain development to advance thinking and promote knowledge of the importance of early learning. DCCEL facilitated a public-private collaboration that developed a statewide system through Healthy Child Care Washington to improve health and safety standards through consultation, training and technical assistance, and by building capacity and quality enhancement projects. This collaborative effort involved representatives from multiple state agencies and numerous educational, health and community organizations. Initially it was a statewide effort to provide public health consultation, mini-grants to child care providers for quality enhancement through R&R, and brain development training for parents, caregivers, and all persons and systems that come into contact with pregnant women and children. The project provided training on early brain development research, built capacity and quality enhancements for infant and toddler care, and created an infant nurse consultation system.

The following areas of activity seek to improve the quality of care for infants and toddlers:

- **Local Public Health Child Care Health Consultation:** Funding awarded to the state Department of Health provides funding to all local health jurisdictions within the state. CCDF funds will be used during the period of this state plan to continue funding local health jurisdictions to provide consultation for infant and toddler care through systems development within communities to child care centers and homes.
- **Healthy Child Care Washington:** The state Department of Health is providing training, technical assistance and consultation to promote health and safety for infants and toddlers through a collaborative effort with local entities involved in infant/toddler child care. The Department of Health also developed an Infant/Toddler Nurse Consultation Handbook. (See Attachment 18, *Public Health Consultation in Child Care*).
- **Brain Research, Training and Awareness:** Information about early brain development research and its implications continues to be dispersed through groups of trainers (“Brain Squads”), who provide information, training and

presentations to their local communities. This information has also been incorporated into the work of their respective agencies. Current state, as well as federal, focus on early learning and child development also builds on this research through the recognition of the importance of a child's earliest years. The lead agency continues to make information available through the BrainNet web-site (www.BrainNet.wa.gov), and through BrainNet publications which were produced with CCDF dollars.

(Attachment 19, *Babies are born learning.... Make every moment count*

(*DSHS 22-302(x) (Rev. 5/00)*), available in eight languages;

Attachment 20, *Rethinking the Brain (DSHS 22-300(x) (10/98)*; and

Attachment 21, *Young Brains Can't Wait (DSHS 22-588(x))*.)

- **Infant Bonus:** Washington State has increased access to child care for infants by implementing an "infant bonus" payable to qualified providers. The infant bonus is a one-time payment of \$250 to a provider who cares for a child under 12 months of age for five days or more. This strategy recognizes that quality care for infants is more costly due to low staff/child ratios and required equipment.

Resource and referral services:

Child care resource and referral (R&R) services were mandated by Washington State law in 1993 under RCW 74.13.0903. Child care resource and referral agencies are responsible for needs assessments, resource development, provider training, technical assistance, and parents training and outreach. In addition, this law mandated the creation of a statewide network, to improve the quantity and quality of child care available in Washington State by fostering statewide strategies, generating, and nurturing effective public-private partnerships. The statewide network also provides important training; creates standards of service, and provides general technical assistance to its 18 locally based child care resource and referral programs.

During calendar year 2002, the R&R agencies across the state responded to 26,638 calls from parents seeking care, providers seeking technical assistance and community and business leaders seeking resources. In 2002, the local R&Rs trained 10,944 child care providers through 3,000 hours of training.

School-age child care:

The Division of Child Care and Early Learning contracts with the School's Out Washington to improve the quality and expand capacity to serve school-age children and youth in Washington State (WRAP). Working in collaboration with five Regional Partner Agencies involved in the Washington Regional Action Project (WRAP) and the School-Age Subcommittee of the Washington State

Child Care Coordinating Committee, School's Out Washington leverages public dollars with grants from private foundations to perform the following services:

- **Provide training and technical assistance to school-age programs via telephone, site visits, a quarterly newsletter and resource library;**
- **Sponsor and plan an annual statewide professional development event;**
- **Educate and engage communities through participation in local, regional and statewide groups; and**
- **Provide funding to local out-of-school time programs to meet or maintain licensing requirements.**

School's Out Washington's status report for 2002, entitled *The Changing Face of After-School Programs in Washington State*, addresses the changing role of after-school time care as programs move to support learning in new ways. It also addresses the community partnerships being created to ensure that children have safe fun places to learn and grow when not in school and outlines the supports needed for after-school providers in Washington. (See Attachment 22, *The Changing Face of After-School programs in Washington State*)

- 5.1.2 The law requires that not less than 4% of the CCDF be set aside for quality activities (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51, 98.16(h)). The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including earmarked funds):

\$ 9,300,000 (4 %)

- 5.1.3 Check either "Yes" or "No" for each activity listed to indicate the activities the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658E(c)(3)(B), §§98.13(a), 98.16(h))

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Comprehensive consumer education;
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grants or loans to providers to assist in meeting State and local standards;
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Improving the monitoring of compliance with licensing and regulatory requirements;
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Professional development, including training, education, and technical assistance;
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Improving salaries and other compensation for child care providers;
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Activities in support of early language, literacy, and numeracy development;
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Activities to promote inclusive child care;
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children;

Effective Date: October 1, 2003 42

Amended Effective: _____

 X _____ Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2))

- 5.1.4 Describe each activity that is checked "Yes" above, identify the entity(ies) providing the activity, and describe the expected results of the activity.

COMPREHENSIVE CONSUMER EDUCATION:

- **Choosing Child Care is a Consumer Guide for Parents** developed by the Washington State Department of Social and Health Services. This booklet aims to help parents become better consumers with a detailed explanation of the choices available, guidance to staffing, help with child care costs, and a checklist for making wise child care choices. Additional funds are provided to child care resource and referral state agencies for consumer education activities when families call to locate child care. Consumer education is one element that is included in all capacity and infrastructure initiatives. (See Attachment 23, *Choosing Child Care: A Consumer Guide for Parents*, DSHS 22-516(X) (Rev. 10/98).
- **The Licensed Child Care Information System** is maintained by the lead agency, DCCEL. This system includes a toll-free phone line (1-866-48-CHECK) and an interactive web page (www.dshs.wa.gov/childcareinfo) for parents to access information about their child care home or center. The staffed toll-free number creates a simple process for parents to call one central, statewide number to gain information regarding their child care provider. They can learn general information such as:
 - If their child care provider is licensed;
 - If any valid licensing complaints and founded CPS complaints have been made to the department by other parents; and
 - Basic information about capacity, ages of children served, and the length of time a provider has been licensed.

A parent who uses the toll-free number to seek a new child care provider is transferred to the Washington State Child Care Resource and Referral Network. If the parent wishes to report a licensing violation, the call is answered by the DSHS Referral Line and transferred to a CPS intake worker. If the parent wishes to obtain more specific information regarding their child care provider, the call is transferred to the appropriate licensor.

- **The Child Care Resource and Referral statewide system** offers consumer education around choosing quality child care. Parents and other interested parties access information from the local R&Rs in person, over the phone, by mail and via the internet. In addition, the WA State Child Care Resource & Referral Network hosts a toll-free number consumer education hotline and an award winning web site (www.childcarenet.org) which offers access to a wealth of information to parents, child care providers, employers and other interested parties 24 hours a day.

- **Parents can get the contact information for their local child care resource & referral. They can also get information on choosing a child care provider, where to access financial assistance, licensing information, in-home child care, background checks of prospective providers, and how to become a child care provider. Parents can also learn how to register complaints, and access other parenting resources.**
- **Employers can access a site specifically geared to help the small or large company integrate Work/Life options in their companies. This site explains why work/family practices would benefit their company and what it takes to make a work/life program successful. It offers a business self-assessment tool to determine the benefit resources of the company, an employee assessment tool to garner the needs of the employees, a cost benefit analysis to show an employer how much is being lost by not having work/family programs, a comprehensive list of types of programs that can be offered in all businesses, and ideas specifically tailored for small businesses.**
- **Child Care Supply and Demand Data is offered on a statewide and county level. Annual and quarterly reports detail the child care referral statistics that the Network has compiled from local R&R agencies. Information includes trends in referred age groups and other data relevant to the child care system in Washington State.**
- **The Links page offers many hyperlinks to a wide range of organizations and programs that are leaders in child/youth care and human services.**
- **DCCCEL's website www.dshs.wa.gov/esa/dccel provides information relating to child care homes and centers, statewide child care programs, available publications, resources, and contract opportunities.**
- **Parents can get information on finding a child care provider, getting information about their provider, handling concerns about their child's care. They can also access information related to child care and early development.**
- **Providers can get information on child care subsidies and billing practices, facility financing, professional development information . They can also access additional resources and publications.**
- **Policy related to subsidized child care is presented, including the WAC and Minimum Licensing Requirements for Child Day Care Centers, Family Child Day Care Homes, School Age Child Care Centers. The WCCC WAC and manual are also posted on site.**

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- **Research data and statistics and posted in monthly updates, providing information on subsidy payments and services provided. Fact sheets regarding child care in Washington State and related federal reports are also provided.**
 - **Additional information is accessible through an extensive publication page which offers booklets, brochures, reports and periodicals, and research and data in PDF format.**
 - **Tribal State Child Care Work Group consists of tribal child care directors and Region X and DCCEL tribal liaisons. This group meets to share information, learn about new programs, identify problem issues, prioritize group needs and develop an annual plan.**

GRANTS OR LOANS TO PROVIDERS TO ASSIST IN MEETING STATE AND LOCAL STANDARDS:

- **CCDF funds are used to support the Child Care Advantages program in the Department of Community, Trade and Economic Development (DCTED). DCTED funds provide technical assistance grants and low interest loan assistance to businesses to develop child care facilities for their employees' children, particularly children of low-income workers.**
- **DCTED administers the Child Care Facility Fund, which provides low-interest loans, and small grants to build or expand employer-supported child care facilities. Rules were revised in 2002 to enable all providers, including family child care home providers, to access the child care facility fund.**
- **DCTED also administers a Child Care Micro Loan Program (with state TANF-reinvestment funds) to increase access to capital for child care businesses across the state. Since its inception in 1999 through June 2003, the Micro Loan Program has loaned \$1,024,524 to 127 child care businesses; created 192 new child care jobs while helping to retain another 132 jobs; created 1,205 new child care slots; and provided 1,689 individuals with 11,909 hours of training and technical assistance. The Child Care Micro Loan Program created five new revolving loan funds available to communities throughout the state. The five revolving loan funds are managed by community agencies that continue to relend revolved funds with the goal of maintaining a resource for child care business providers who might otherwise be unable to start, expand, enhance or continue their businesses.**

**IMPROVING THE MONITORING OF COMPLIANCE WITH LICENSING
AND REGULATORY REQUIREMENTS:**

- **Washington State requires full licensing of child care centers and homes including on-site inspections. Centers and homes are required to renew their licenses every three years. Child care centers receive unannounced annual monitoring visits and family child care homes receive an unannounced interim monitoring visit within the three year licensing cycle. During the initial licensing period, licensors may make frequent visits to help licensees meet regulatory requirements. When licensees are issued a probationary license, licensors make frequent visits to ensure compliance with the probationary agreement. In addition, DCCEL Health Specialists inspect child care centers to determine compliance with health and safety regulations; certify, deny or revoke health certifications; and provide technical assistance to providers. These visits are conducted upon initial licensure and again before full licensure is granted.**

Licensing complaints are usually investigated with unannounced site visits. Corrective action usually includes a statement of deficiencies and a plan of correction. It can also include a probationary license, and civil penalty, license revocation or suspension.

Background checks are performed on all child care providers, assistants and volunteers of licensed child care centers and on providers and members of family child care households (sixteen years of age or older) who have unsupervised or regular access to children in care.

- **DCCEL contracts CCDF funds with the State Fire Marshal to conduct fire safety inspections in child care centers and to provide training and consultation for DCCEL licensors.**
- **DCCEL's Quality Assurance Unit is developing a Licensor Training and Mentoring Program in keeping with national research that indicates quality child care begins with well-trained licensors. The program goal is to increase consistency in licensing practice, regulation enforcement and interpretation of licensing requirements. DCCEL recently formed a Staff Development Team which created Individual Staff Development Assessment and Plans and has identified Competencies and Skills for the following positions: Licensing Supervisor, Child Care Center Licensor, Health Specialist, Family Child Care Licensor and Clerical Support Staff.**

The first project focuses on licensor training, based on identified competencies and skills. The Staff Development Team identified the skills for "Core Licensor Training" as those needed within the first six months of employment and developed Core Licensor Training and Mentoring Modules: Job Basics, Licensing Tools, Computer Skills, Licensing Process, Complaint Process, Evaluating/Assessing Child Care Programs and Environments, Ethics, Provider Orientation. As a result of the Licensing Practice

Improvement Project, and feedback from licensors and their supervisors, the first training module to be developed is for the Complaint Process. Content and curriculum is being developed for “How to Conduct an Investigation”, “Interviewing” and “CAMIS Complaint Module”. It is expected that all licensing staff will complete this module by November 2003.

**PROFESSIONAL DEVELOPMENT, INCLUDING TRAINING, EDUCATION
AND TECHNICAL ASSISTANCE:**

- DCCEL maintains the Washington State Training and Registry System (STARS). The STARS program improves child care through basic and on-going training for child care providers. Family child care licensees, child care center and school-age directors, program supervisors and lead staff are required to complete 20-hour Basic STARS training within the first six months of licensure or employment date, or meet the educational exemption. Experienced providers may apply for a waiver, based on specific criteria. (See Attachment 24, *Washington State Training and Registry System/Washington Stars*)

Each year thereafter, mandatory participants must complete ten clock hours or one college credit of approved training. For directors and program supervisors, five of the ten hours must be in program management or administration. Scholarships are available for both the Basic and continuing training requirement. Provider training records, trainer profiles and training information are recorded in the STARS registry (a web based database that can be accessed by providers, trainers, licensor and the general public).

DSHS contracts with the Washington Association for the Education of Young Children (WAEYC) to administer trainer and training approval, scholarship disbursement, general coordination publicity, and collection and data entry of provider information for the STARS Registry. Through WAEYC, DSHS provides partial support to conferences that are STARS approved and scholarships to child care providers.

- DCCEL trainers will provide training for licensing staff and child care providers. DCCEL’s training program for licensing staff is designed to develop skills in assessing the compliance of licensed child care facilities with regulatory requirements. This will improve compliance monitoring by increasing consistency in licensing practice, regulation enforcement and interpretation of licensing requirements. Also, licensors will be able to offer more pertinent, practical and relevant technical assistance to child care providers. DCCEL’s training program for child care providers includes training on health and safety, nutrition, first aid/CPR, recognition of communicable diseases, child abuse detection and prevention, care of children with special needs, developmentally appropriate practice and all applicable state laws regarding child care licensing and subsidy billing.

IMPROVING SALARIES AND OTHER COMPENSATION FOR CHILD CARE PROVIDERS:

- The lead agency is a partner in the public/private funding of the Teacher Education and Compensation Helps (T.E.A.C.H.) Early Childhood ® Washington Program. DCCEL contracts for the administrative services through the Washington State Child Care Resource & Referral Network.

T.E.A.C.H. provides scholarships to eligible child care providers who are interested in attaining a CDA, ECE Certificate or an AA degree in early childhood education. This program links training, compensation and commitment to improve the quality of early childhood. Expenses are shared by the recipient, the sponsoring child care center or family child care provider and T.E.A.C.H. Scholarship money covers the largest portion of tuition and books costs plus allows stipends for travel and release time. A scholarship recipient must attend classes at a T.E.A.C.H. affiliated college and successfully complete 12 to 20 credits per contract year. All providers agree to pay a portion of their tuition and book costs and to remain with their facility for 12 months after their scholarship contract ends. They are eligible to receive a bonus after completion of their contracted classes.

Child Care Providers can get information about T.E.A.C.H and other available child care provider scholarships through the Network's web page (www.childcarenet.org) . They can also find information on loans and grants available to improve their child care facility, links to state subsidy programs, answers to business planning, a home business manual, center business manual, facility planning manual and other provider resources.

ACTIVITIES IN SUPPORT OF EARLY LANGUAGE, LITERACY, AND NUMERACY DEVELOPMENT:

- ECEAP, our state's Pre-K program, receives CCDF funds to implement educational programs focused on the development of early language, literacy and numeracy skills.
- Our Governor's Office and the Office of the Superintendent of Public Instruction will work together to define the leadership and process needed to determine the government structure for school readiness, which will include these early learning domains.
- The CCCC is working within the context of our state's P-16 vision to ensure that all children have early opportunities for optimal development and potential success in school. The CCCC is currently identifying the principles needed to support the development and implementation of strategies for a system of early learning and care that incorporates skill development in the areas of language, literacy and numeracy.

ACTIVITIES TO PROMOTE INCLUSIVE CHILD CARE:

- The state pays a higher child care subsidy rate to providers who care for children with special needs. To qualify for the higher rate, the child's special need and need for additional care must be diagnosed by a registered nurse or a health, mental health, education or social service professional with at least a Master's degree.
- The *Include Me/Guide to Inclusive Child Care*, DSHS publication 22-486(X)(201) was a coordinated effort of DCCEL, Child Care Coordinating Subcommittee on Inclusive Child Care and other entities to provide information to child care providers about caring for children with special needs and available resources. The booklet is maintained and reprinted by DSHS with CCDF funds. (See Attachment 26, *Include Me/Guide to Inclusive Child Care*, (DSHS 22-486(X)(2/01).)
- The CCCC Inclusive Child Care Subcommittee has created a Vision and Action Plan to increase access to quality, inclusive child care and out-of-school time programs for children and youth throughout the state. (See Attachment 27, *Vision and Action Plan 2001-2005, draft 9/3/01*)
- DCCEL partners with ITEIP in ongoing activities to promote cross referral of child care and early intervention service systems for families of children, ages birth to three years of age who have disabilities and/or delays .

HEALTHY CHILD CARE AMERICA AND OTHER HEALTH ACTIVITIES, INCLUDING THOSE DESIGNED TO PROMOTE THE SOCIAL AND EMOTIONAL DEVELOPMENT OF CHILDREN:

- DCCEL contracts with the Department of Health to invest CCDF Quality dollars, through Healthy Child Care Washington, to foster the link between child care and health systems statewide and to develop innovative strategies for addressing growing health and safety concerns (social/emotional, physical, cognitive and mental health) in child care environments through a partnership between local R&Rs and local public health consultants.
- The Department of Health is developing an evaluation process collaboratively designed by DOH, LHJ representatives, and an evaluation consultant that includes information identified in the year end report and will be consistent with the National Evaluation of Community Integrated Service Systems (CISS) Development in Child Care Grants. This evaluation moves from measuring capacity to measuring outcomes at four levels: systems, child care health consultants, child care providers and parents.

OTHER QUALITY ACTIVITIES THAT INCREASE PARENTAL CHOICE, AND IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE:

Effective Date: October 1, 2003 49

Amended Effective: _____

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- **DCCEL contracts with School's Out Washington (SOWA) to create a statewide system with the goal of increasing the quality and availability of out-of school time care in Washington. SOWA coordinates meetings for the CCCC's School-Age Care subcommittee, produces and distributes newsletters to school-age care providers, coordinated forums and public awareness activities, provides quality enhancement grants and facilitates professional development opportunities.**
 - **DCCEL contracts with the Office of Superintendent of Public Instruction (OSPI) to implement the Family Child Care Quality Incentive Program. This program supports local sponsors and a targeted group of family day care home providers in providing USDA Child and Adult Care Food Program services to low-income children in child care.**
 - **The Child Care Coordinating Committee (CCCC) facilitates coordination and communication among state agencies involved in child care and early childhood services. It submits an annual report to the legislature, recommending improvements to state services.**
 - **Career and Wage Ladder Pilot Project Research**

Phase II (July 1, 2003-December 31, 2003): DCCEL has contracted with Washington State University to assess the impact of the Career and Wage Ladder Pilot Project on the quality of child care. WSU will analyze data collected during the previous 24 months from 120 child care centers and a matched control group to assess the effectiveness of this quality project. Data from four survey tools and oral interviews will be analyzed and compared with baseline data established during Phase I. Findings will be provided to the Department of Social and Health Services by written report and will also be presented at the NAEYC conference in November 2003.

Post Career and Wage Ladder Pilot Project Research (July 1, 2003 - December 2004): Funding for the project was not renewed. DSHS has contracted with Washington State University to evaluate how employees and centers respond to the termination of the pilot. Specifics will include the impacts on the abilities of child care centers to remain open, to hire qualified employees, to retain staff, and to serve low income families; and on the abilities of employees to pursue early childhood courses and workshops.

5.1.5 Is any entity identified in sections 5.1.1 or 5.1.4 a non-governmental entity?

() No.

(X) Yes, the following entities named in this part are non-governmental:

Name:

Effective Date: October 1, 2003 50

Amended Effective: _____

Type (see section 1.6 of the guidance):

- **Washington State Child Care Resource and Referral Network, private non-profit**
- **School's Out Washington, private non-profit**
- **Washington Association for the Education of Young Children, private non-profit**

5.2 - Good Start, Grow Smart Planning and Development

This section of the Plan relates to the President's *Good Start, Grow Smart* initiative which is envisioned as a Federal-State partnership that creates linkages between CCDF, including funds set-aside for quality, and State public and private efforts to promote early learning. In this section, Lead Agencies are asked to assess their progress toward developing voluntary guidelines on language, literacy, pre-reading, and numeracy, a plan for the education and training of child care providers, and a plan for coordination across at least four early childhood programs and funding streams.

5.2.1 - Voluntary Guidelines for Early Learning

- Indicate which of the following best describes the current **status** of the State's efforts to develop research-based early learning guidelines (content standards) regarding language, literacy, pre-reading, and numeracy for three to five year-olds:
 - a) ☐ Preliminary thinking or planning.
 - b) ☐ Guidelines are being developed.
 - c) ☒ Guidelines are developed but need to be modified.
 - d) ☐ Guidelines are developed and implementation is in progress.
 - e) ☐ Guidelines are developed and implemented in pre-kindergarten programs but not in child care.
 - f) ☐ Guidelines are developed and implemented.
 - g) ☐ Other. Please describe:
- Describe the **process** that was used or is planned for developing the State's early learning guidelines. Indicate who or what entity provided (or is providing leadership) to the process as well as the stakeholders involved. Was (or is) the process framed by State legislation, research and/or guiding principles? If so, please describe. How are (or will) the early learning guidelines and the State's K-12 educational standards aligned? If they are not aligned, what steps will be taken to align them? If the early learning guidelines are in development, what is the expected date of completion?

In June 2000, the Office of Superintendent of Public Instruction (OSPI), in partnership with an Early Childhood Literacy Task Force, developed the Framework for Achieving the Essential Academic Learning Requirements in Reading Writing Communication—Birth to 5 Years. The task force membership consisted of a broad base of early childhood stakeholders across the spectrum of birth to 5 years and Grades K-3. Stakeholders from the child care community participated on the

Effective Date: October 1, 2003 51

Amended Effective: _____

Early Childhood Literacy Task Force. The Framework was initiated by OSPI, not by the legislature or the Governor.

This document was created in an effort to link the life experiences of early childhood with eventual success in school. Specifically, it was designed to assist early care and education providers in planning and implementing early learning opportunities that will help prepare young children for later success in meeting the essential academic learning requirements in reading, writing, and communication.

These learning frameworks were not intended for use as a group or individual screening tool to place children in programs or to make determinations of readiness for school. They were not intended to be used as an assessment checklist nor as an evaluation tool to make high-stakes decisions about children's program placements.

The frameworks were intended to guide providers/teachers as they develop curriculum and activities for the children in their care.

Assumptions/Guiding Principles reflected in this document:

- **Literacy begins at birth;**
- **Children progress at different rates and individual children may show more or less progress at certain times;**
- **Learning is dependent on one skill being the basis for another skill or a number of skills at the next level;**
- **Careful observation of young children is critical to determine whether or not a child has a particular skill. Very young children perform skills within the context of daily events or activities which must be carefully observed for the purposes of assessment;**
- **Literacy is a critical tool used for thought and communication and the transmission of language and culture across generations.**

In June 2000, this document was created in alignment with Washington State's K-3 educational standards. However, the K-3 educational standards are currently under revision.

The Governor, in collaboration with the Office of Superintendent of Public Instruction, will move forward in developing voluntary kindergarten readiness guidelines that child care providers, pre-school teachers, kindergarten teachers and parents can use to assess readiness for school in an approach that aligns the goals and interests of the early childhood care and education system with those of the K-12 school system. The guidelines will be research based, developmentally appropriate and address social and emotional development, physical development, language and literacy, and cognition and general knowledge. The date for completion of these guidelines is yet to be determined. However, the existing *Framework for Achieving the Essential Academic Learning Requirements in Reading Writing Communication—Birth to 5 Years* will be used in some capacity to assist the development of Washington's Kindergarten Readiness Guidelines.

- Describe the **domains** of development that the early learning guidelines address or are expected to address, e.g., social, emotional, cognitive, linguistic, and physical. States that have completed early learning guidelines should include a copy as an appendix to the plan. If the guidelines are available on the web, provide the appropriate website address.

Please see Attachment 28, “Framework for Achieving the Essential Academic Learning Requirements in Reading, Writing, Communication—Birth to 5 Years”

- Describe the process the State used or expects to use in **implementing** its early learning guidelines, e.g., feedback and input processes, dissemination, piloting, training in the use of the guidelines, and linkages with other initiatives such as incentives for provider education and training. To what extent is (or was) implementation anticipated in the development of the guidelines? To which child care settings do (or will) the guidelines apply and are the guidelines voluntary or mandatory for each of these settings? How are (or will) community, cultural, linguistic and individual variations, as well as the diversity of child care settings (be) acknowledged in implementation?

Historically, Washington State has used a holistic and inclusive process in short and long-term planning for early learning opportunities for young children. To this end, Washington State will engage appropriate leaders and stakeholders in an input process, dissemination, piloting, and training in the use of Kindergarten Readiness Guidelines.

- As applicable, describe the State's plan for **assessing** its early learning guidelines. What will be the focus of the evaluation, i.e., guideline development and implementation, programs or child care settings, and/or outcomes related to children? Will young children's progress be evaluated based on the guidelines? How will assessment be used to improve the State's guidelines, child care programs, plans and outcomes for individual children?

The assessment plan for the Kindergarten Readiness Guidelines will use research based early childhood education strategies and evaluation methods. An assessment plan will be further constructed in the development process of the Kindergarten Readiness Guidelines.

Section 5.2.2 - State Plans for Professional Development

- Describe the provider training, technical assistance, and professional development opportunities that are available to child care providers. Are these opportunities available Statewide to all types of providers? If not, please describe.

In Washington State, DCCEL and other stakeholders recognize, promote, as well as expend CCDF and other public-private fiscal resources on professional development and education programs that support the fact that child care providers are more than a tool that allows parents to work; they are in the business of brain development. In order to produce high-quality early learning and healthy brain developing programs, it is necessary to attract and maintain an educated workforce. In Washington State, both formal education and on-the-job community-based training are essential tools for developing quality educators.

Washington has a professional development and education system that flows across a continuum of provider/workforce experiences, as well as across all communities in our state. Child care providers and early learning teachers have a wide range of professional skills and preparations (e.g. high school diploma, community-based training, CDA, A.A., B.A. or Master's degree). Also, the professional development and educational opportunities look different in every community. However, in Washington State, we work to make our professional development and education system inclusive of all skills, preparation and experiences, and across all communities.

Listed alphabetically below are the many diverse organizations/programs providing training, technical assistance, and professional development opportunities for child care providers. Each of the organizations/programs listed serve providers across the state. Each description includes the types of providers served.

- **The Governor's Head Start-State Collaboration Office (Collaboration Office), building on historical child care and Head Start professional development efforts, developed and sponsored a Professional Development Initiative (PDI) in partnership with Olympic College, and the WA Association of Educators of Personnel in Early Childhood Program to create another professional and career development path for Head Start teachers and other early childhood education professionals in Washington State. This professional development initiative created a new 90-credit Associate degree that provides 40 credits in General Education and 50 credits of Early Childhood Education content. The professional development initiative is now in the process of obtaining individual college approval to offer this new Associate degree. These approvals will be followed by submission to and approval from the State Board for Community and Technical Colleges.**
- **Healthy Child Care Washington (HCCW) is a program of the Washington State Department of Health committed to improving the quality of child care through promoting and integrating quality health and safety practices in child care and early childhood programs. HCCW focuses some of their work toward child care providers who care for infants, toddlers and children with special needs.**

With their partners, HCCW develops policies, practices and programs that promote and enhance health and safety in child care and early childhood programs. Activities of HCCW include:

-
- **Coordination of a statewide Child Care Health Consultation system with consultants in each local public health department.**
 - **Training and consultation for child care providers and parents that promotes safe, healthy child care *environments* for all children;**
 - **Specific/tailored health and safety, and social and emotional *child development* training and consultation for child care providers who care for infants, toddlers and children with special needs.**
- **School's Out Washington provides the leadership for The Washington Regional Action Project (WRAP). This is a collaborative partnership to increase the quality and availability of programs for school-age children and youth in Washington State. School's Out Washington works with five other organizations to link communities with resources, including CCDF funds. They provide professional development opportunities for program staff. They also work to broaden involvement in planning for regional youth services and building a system of out-of-school time care.**
 - **State Training and Registry System (STARS): The purpose of Washington STARS is to ensure quality child care for all children in Washington State through increased opportunities for basic and on-going training for child care and early education and school-age providers. It includes trainer, training organization and training approval, scholarships and a registry system. The Washington Association for the Education of Young Children (WAEYC) administers STARS through a contract with the lead agency.**

All family child care providers, child care center and school-age care directors, program supervisors, site coordinators and lead teachers are required to meet the 20 hours of essential child care training with the first six months of being licensed or hired. This training requirement may be met by taking the 20-hour course, receiving an exemption because of educational background, or receiving a waiver because of experience. At least 10 hours of continuing education is required annually after meeting the 20-hour basic training requirement. For directors and program supervisors, five of the ten hours each year must be in the area of administration. All others may choose training in any of the 11 Washington State Core Competency Areas. Child care and school-age provider required to take STARS training and needing financial assistance may apply for scholarships.

Training meets STARS requirements if provided by a STARS approved trainer or training organization or is a college class designed to meet the STARS requirements. In addition, child care and school age providers may apply for training that is not STARS approved to count towards the continuing education requirement.

The STARS Registry is a tool for child care and school-age providers to chart their professional development and to keep an up-to-date record of completed education and work experiences. The Registry also serves as a data base and

web site with information about STARS approved trainers, training organizations and available training. The Registry is owned, maintained and upgraded by DCCEL. WAEYC is responsible for data collection, correction and entry, as well as assisting Registry users.

- **Teacher Education and Compensation Helps (T.E.A.C.H.) Early Childhood ® Washington Program** is a program that gives scholarships and support to child care workers to help them complete professional certificate or college degree programs in early childhood education and to increase their compensation. T.E.A.C.H. is implemented through the Washington State Child Care Resource and Referral Network with support from the Foundation for Early Learning, the City of Seattle, the Paul G. Allen Charitable Foundation and with CCDF funds through DCCEL.

T.E.A.C.H. is designed to meet the specific needs of three distinct segments of the child care provider population:

- Full-time child care center classroom teachers, school age care providers and family child care assistants;
- Part-time school age care providers working between 15-29 hours per week; and
- Family child care providers -- the self-employed individuals who are licensed by the State to care for 6-12 children in the caregiver's home.

There are many complicated nuances to these models. There are two models for each of the first two categories and only one model for the third. The only difference between the two models offered for full time child care center classroom teachers and part time school age providers is in the bonus method the sponsoring program chooses. Model I calls for the sponsoring program to provide the T.E.A.C.H participant with a 1.5% raise upon completion of their contract. Model II calls for the sponsoring program to pay a set dollar amount as a one-time bonus upon completion of the contract. There is only one family child care provider model because, being self-employed, there is no "sponsoring program" to commit to the raise or bonus.

- **Washington Association for the Education of Young Children (WAEYC).** DCCEL contracts with WAEYC to administer trainer and training approval, scholarship disbursement, general coordination publicity, and collection of provider information for the STARS Registry. In addition, WAEYC offers:
 - *Training Educators' Network (TEN)* www.trainingwa.org - develops trainer communication, network and support systems, and distributes research and best practices related to early learning. Activities include development of a database of trainers, establishment of a listserv to provide near-immediate information, facilitation of monthly trainer conference calls, production and distribution of a trainers' newsletter, planning and implementing a trainers' "path" at a minimum of one statewide convention. This effort will

also develop a comprehensive database (and web-based calendar) of workshops and conferences across the state to increase collaboration, identify gaps and duplication, and allow caregivers to access the full range of educational opportunities available to them. This will serve all of Washington.

- **The Washington Association of Educators of Personnel in Early Childhood Programs (WAEPECP):** The higher education system (Community and Technical Colleges and 4-year colleges) in Washington State is dedicated to educating professionals in the field of early childhood education. The faculties of the Early Childhood Programs in the Community and Technical Colleges, as well as in the State Universities, meet regularly in an effort to coordinate program offerings and to support articulation between institutions. Members of WAEPECP have worked collaboratively to develop State Skill Standards for early childhood personnel being educated at the college level. They continue to collaborate on training grants, apprenticeship programs and alignment of requirements to ease transferability for students.

WAEPEC is also working statewide to develop a career ladder for professionals in Early Childhood Education. Currently, people can begin with the course work for the STARS requirements, move on into the performance based Child Development Associate Credential, then to a one-year Certificate in ECE, a variety of Associate Degrees, a Bachelors Degree, a Masters Degree and finally, a Doctorate Degree.

This year, Community and Technical colleges and State Universities (in partnership with the Head Start-State Collaboration Office) have developed a common statewide Associate of Applied Science degree (AAS-T) that has been widely accepted. Additional efforts are under way to develop articulation agreements with public and private four-year institutions. This new AAS-T Degree will provide the critical content ECE professionals working in the field need and will secure transfer opportunities between two-year colleges and four-year institutions.

- **The Washington State Child Care Resource & Referral Network** has several training, professional development and educational opportunities for child care providers. In addition to implementing the T.E.A.C.H. program, the Network offers the following:
 - ***Building Blocks*** - Local child care resource and referral agencies (CCR&R's) partner with local family child care associations to offer this 20-hour, STARS-approved high-quality, relevant and practical training and mentoring to new or prospective family child care providers.
 - ***DASA*** - The State Division of Drug and Alcohol Abuse has contracted with the CCR&R Network to design, create and disseminate a training curriculum to assist caregivers both in working with children of substance

abusing parents, and in communicating effectively with the parents about the impact their addiction is having on their children.

- *Learning Options* - is the premier Internet campus for early childhood professionals and parents to expand and enhance professional development and educational opportunities.

Public input from statewide forums:

Our six statewide public forums held in the preliminary steps of writing this plan provided valuable input to be considered as our state creates its plans for professional development. Every group voiced the opinion that a lot of good training, education and partnerships are currently happening in local communities and expressed the hope that these efforts be honored and incorporated into the professional development plan. They suggested that lead child care provider organizations be strengthened. They requested that early learning guidelines be incorporated into existing training systems; and that thought be given to creating new ways to combine trainings and offer more technical assistance from a variety of sources. They suggested that training opportunities be tailored for specific communities via different educational models and that education programs be scheduled to allow easy access for providers who work during the day. They also suggested that material and trainings include cultural and linguistic relevancy for child care providers and their clients.

A specific suggestion was for the development of a basic written curriculum to support the early learning guidelines for a child care provider's use in implementing them. This was envisioned as an optional accompaniment to the guidelines; inclusive of pictures and materials lists for theme boxes; and available in English and Spanish. Further, it was envisioned to be a training component for STARS; an on-site model for homes and centers with consultants able to provide the STARS credits.

Community input recommended the use of skill standards and statewide alignment of standards and funding, despite the variances in communities and resources. Recognizing that Early Learning programs have always helped children "learn", stakeholders requested the involvement of child care providers in the creation of the standards and the clarification of their roles in becoming trained in and implementing them. Also expressed, however, was the view that not all learning can be seen through skill standards and assessment tools, and that educators need to "learn to see learning" when and where it is happening at all levels of a child's development. Also needed is the inclusion of parents and the recognition that parents are the "first educators" of their children.

Community members expressed an interest in the establishment of a statewide professional development and education system plan that is coordinated and holistic, and provides pathways through the education system. To that end, they

expressed hope that articulation work will continue, creating a seamless system between degree programs. They stated the need for scholarships and other financial assistance for child care providers to acquire education for implementing the early learning guidelines. They requested assistance for the purchase of equipment and facility improvement to acquire accreditation. They also requested that compensation be tied to professional development.

- Does the State have a child care provider professional development **plan**?

- (X) Yes; if so, identify the entities involved in the development of the plan and whether the plan addresses all categories of providers. As applicable, describe: how the plan includes a continuum of training and education, including articulation from one type of training to the next; how the plan addresses training quality including processes for the approval of trainers and training curriculum; how the plan addresses early language, literacy, pre-reading, and numeracy development. Indicate whether the plan is linked to early learning guidelines and, if so, how.
- () No; if no, are steps under way to develop a plan? If so, describe the time frames for completion and/or implementation, steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and numeracy.

STARS emerged from a widespread call from both child care providers and consumers for increased training and compensation to improve the quality of care for children and youth in Washington State. In 1997, the Washington State Legislature directed DSHS to adopt rules to require annual training for child care providers. The elements of this new system were outlined and funding was allocated for its implementation in the 1997-99 Budget Act. The Career Development Subcommittee of the Child Care Coordinating Committee along with staff from DSHS, Office of Child Care Policy (OCCP), held several planning meetings in various counties during the fall and winter of 1997/98. OCCP also held public forums across the state in the spring of 1998 to gather input. Many individuals in the broad field of early care and education and school-age care were actively involved in providing recommendations of policies and procedures that guide this career development system.

STARS is for all who work in licensed child care and school-age programs in Washington State. Required participants include family child care providers, child care center and school-age directors, program supervisors, site coordinators and lead teachers. Participants select training and education to increase their skills and knowledge within the 11 Washington State Core Competency Areas.

STARS trainers must meet certain requirement in education, experience and background in teaching adults. Specific requirement depend upon the type of training to be offered as well as the audience for which they provide training. Once

approved, STARS trainers and training organizations are expected to fulfill their STARS responsibilities and meet the following training standards:

- Incorporate anti-bias and culturally relevant principles into their training content and format;
- Develop and implement learning outcomes for participants in each training;
- Foster concrete learning experiences for each participant by considering planning for all learning styles – visual, auditory, tactile, kinetic and eclectic;
- Assess participants learning related to the learning outcomes through direct and indirect evidence;
- Maintain High standards of professional conduct in their STARS role; and
- Participate in continuing professional development opportunities.

If a training participant, colleague or other person has a concern about a trainer, training organization and/or training, the STARS concern process is followed. If a trainer or training organization consistently does not meet the STARS responsibility or standards or engages in fraudulent or illegal activity, STARS reserves the right to implement its sanctions process.

Training and education provided by STARS approved trainers, training organizations and colleges in early language, literacy, pre-reading and numeracy development would meet the STARS requirement for continuing education. As Washington State develops early learning guidelines, related training will be developed and provided through STARS and other avenues.

Efforts are under way to develop a statewide plan that will coordinate/articulate the continuum across all the early learning programs (child care, ECEAP, Head Start, School pre-K etc), provider/teacher experiences. Whereas Washington state has several viable committee/groups working on admirable goals and objectives dealing with professional development articulation, quality and cognitive development, they are not currently connected formally, or aligned in a meaningful, planful way.

The Governor's Head Start-State Collaboration Office has committed to sponsor a Professional Development & Education forum for these groups to collaboratively envision their next step forward together. The specifics of this forum have not been developed; a core group of professional development & education stakeholders will work to design this forum. The Governor's Head Start-State Collaboration Office will work with leaders from the following entities to develop this Professional Development & Education forum:

1. Child Care Coordinating Committee, Career Development Subcommittee
2. Department of Health
3. Division of Child Care and Early Learning
4. The Governor's Office
5. ECEAP training, professional development and education system
6. Head Start training, professional development and education system
7. The Office of Superintendent of Public Instruction
8. Schools Out Washington
9. Teacher Education And Compensation Helps (T.E.A.C.H.)

Effective Date: October 1, 2003 60

Amended Effective: _____

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10. The Washington Association of Educators of Personnel in Early Childhood Programs
 11. Washington Association for the Education of Young Children
 12. Washington State Child Care Resource and Referral Network
 13. Private sector representation supporting the professional development and education of early learning teachers/providers

Because the majority of Head Start, Early Head Start and ECEAP programs in Washington State are now in partnership together or in partnership with child care programs and/or school districts to offer extended services, we need to include Head Start, ECEAP and School professional development systems in the child care provider professional development and education plan. More and more local child care, Head Start, Early Head Start and ECEAP programs are braiding multiple sources of public dollars and are breaking down the boundaries that have separated the early childhood provider community. It is time for the state-level planning committees to more formally recognize, integrate and promote the same level of partnership action.

DCCEL, the CCCC, the Governor's Office, OSPI and other stakeholders of the professional development and education system will work to develop a plan that addresses articulation, quality, and supports social emotional development, early language, literacy, pre-reading and numeracy development. The timeframe for completion and/or implementation of this plan is undetermined at this time. However, the Head Start-State Collaboration Office has committed to sponsoring the initial "plan the plan" forum sometime this year (2003).

Equally important to the development of a plan and coordination of a professional development and education system, is to link this system to early learning guidelines and standards. Teaching practices should be closely aligned to the guidelines. When Washington State (Governor's Office and OSPI) develops the Kindergarten Readiness Guidelines, it will work to align these guidelines with the professional development and education systems' teaching guidelines.

- Are program or provider-level **incentives** offered to encourage provider training and education? If yes, please describe. Include any links between the incentives and training relating to early language, literacy, pre-reading, and numeracy.

TEACH Early Childhood® WASHINGTON (Teacher Education And Compensation Helps - TEACH) is a program that gives scholarships and support to child care workers to help them complete professional certificate or college degree programs in early childhood education and to increase their compensation.

- What are the expected **outcomes** of the State's professional development plan and efforts to improve the skills of child care providers? As applicable, how does (or will) the State

assess the effectiveness of its plan and efforts? If so, how does (or will) the State use assessment to help shape its professional development plan and training/education for child care providers?

To be determined

Section 5.2.3 - State Plan for Program Coordination

- Does the State have a **plan** for coordination across early childhood programs? If so, is there an entity that is responsible for ensuring that such coordination occurs? Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination. If no, what steps are under way to develop a plan for coordination?

DCCEL supports and works in collaboration with the Child Care Coordinating Committee (CCCC), which was established in 1988 by the legislature to provide coordination across early childhood programs. Because the planning, governing, and accountability of the early learning and out of school time system is determined by multiple leaders and stakeholders, the CCCC has historically been the entity for developing a coordinated plan.

The CCCC is positioned and ready to work with the Governor's Office, and OSPI around coordination of child care and early learning services. OSPI and the Governor's Office will also include members of the CCCC to serve on this new coordination task force.

Washington State's plan for coordination across early childhood programs is changing, including the entity(ies) responsible for ensuring that such coordination occurs. Head Start, ECEAP (state pre-K), Child Care, IDEA Part B&C, and school district pre-K programs will all be a part of the new coordination plan. The nature of the coordination will be determined within the new and existing coordinating structures. OSPI, the Governor's Office, DCCEL and the CCCC will all be a part of the next steps to develop a plan for coordination.

- Describe the **results** or expected results of this coordination. Discuss how these results relate to the development and implementation of the State's early learning guidelines, plans for professional development, and outcomes for children.

Currently, the Child Care Coordinating Committee statute stipulates that the committee must bring together people representing components of the early care and education system to:

- a) Serve as an advisory coordinator for all state agencies responsible for early childhood or child care programs for the purpose of improving communication and interagency coordination; and**

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

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- b) Annually review state programs and make recommendations to the agencies and the legislature which will maximize funding and promote furtherance of the policies set forth in RCW 74.13.085.**

However, the future work of the new early learning coordination task force within OSPI, and the Governor's Office's Kindergarten Readiness Guidelines project (development and implementation), will require additional results or expected results of this coordination. The CCCC, the Governor's Office and OSPI will work collaboratively in the development of new results.

- Describe how the State's plan supports or will support continued coordination among the programs. Are changes anticipated in the plan?

To be determined.

PART 6 -- HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(ONLY THE 50 STATES AND THE DISTRICT OF COLUMBIA COMPLETE PART 6.
ONLY TERRITORIES COMPLETE PART 7.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: <http://nrc.uchsc.edu/>

Section 6.1 - Health and Safety Requirements for Center-Based Providers

(658E(c)(2)(F), §§98.41, §98.16(j))

6.1.1 Are all center-based providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

- () YES, answer 6.1.2 and proceed to 6.2.
(X) NO, answer 6.1.2 and 6.1.3.

Centers that are not subject to licensing must be “certified” as meeting Washington State licensing requirements, or have an approved federal plan in accordance with national or state standards for health and safety standards.

The department may “certify” a day care center for payment if the center is:

- (a) Licensed by an Indian tribe;**
- (b) Certified by the Federal Department of Defense; or**
- (c) Approved by the superintendent of public instruction’s office.**

ECEAP PROGRAMS: ECEAP Programs are not subject to licensing under state law. ECEAP Program Performance Standards (See Attachment 25, *ECEAP Program Performance Standards*) must provide health services using an approach that addresses the individual child's health issues and makes appropriate referrals to family members. Staff and families must work together to remove obstacles to the health and safe development of each child. Health practices must address family needs through a variety of service strategies. These strategies must include:

- **Education of children and families concerning effective nutritional and sanitation practices, child safety, medical and dental care, non-violent communication and child abuse;**
- **Development of environments and practices that minimize injury to emergency situations;**

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- Education of staff, children and families to recognize and report child abuse;
 - Provision of appropriate medical, dental, mental health, nutrition, and therapeutic services indicated by child's status.
 - Referral of parents/guardians to appropriate services that address physical, mental, emotional and medical issues not covered by ECEAP services; and
 - Education of parents about advocating for their child's health and safety needs in various community and educational environments.

SEASONAL DAY CAMP PROGRAMS: Seasonal day camp programs for school age care are exempt from licensing but those that have a contract with the State of Washington and provide subsidized child care are eligible for Working Connections Child Care (WCCC) under the following conditions:

- (a) Of a duration of three months or less;
- (b) Engaged primarily in recreational or educational activities; and
- (c) Accredited by the American Camping Association (ACA).
(See Attachment 29, *American Camping Association Accreditation Standards for Camp Programs and Services*).

A total of twenty-one (21) ACA accredited seasonal day camps have received child care subsidy payments in the state. Sixteen sites are in King County, two in Pierce, and one each in Spokane and Kitsap Counties. The American Camping Association is the only nationally recognized camp accreditation program in the United States. The accreditation Standards are rather high and they meet or exceed the standards for quality care.

Seasonal Camps pay a fee to the ACA for the accreditation process, which is proportional to the camp's total operating expense and the number of children to be served. DCCEL receives a verification of the camp's ACA accreditation and issues a certificate based on the ACA's accreditation. The ACA accreditation has been the national and industry standard for camps since 1950. It has high standards that apply to food service, transportation, health and wellness, operational management, human resources and outdoor program activities. In some cases the ACA standards exceed the licensing standards

6.1.2 Have center licensing requirements as relates to staff-child ratios, group size, or staff training been modified since approval of the last State Plan? (§98.41(a)(2) & (3))

- (X) NO
() YES, and the changes are as follows:

6.1.3 For that center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)

ECEAP PROGRAM: ECEAP Program Performance Standards require ECEAP programs to establish policies and practice to safeguard against children's exposure to and transmission of, infectious diseases in accordance with the Office of Superintendent of Public Instruction (OSPI), Infectious Disease Control Guide for School Staff developed by the Washington State Department of Health. Programs must follow universal safety precautions and follow local requirements for reporting of communicable diseases. Sufficient toilet and hand washing facilities that are readily available and reachable by children must be maintained.

Contractors must comply with state and local sanitation laws and regulations for food preparation and handling, storage, and service including:

- Clean toilets and hand washing facilities that are easily reached by children;
- Preparation of food in an area separate from toilet and hand washing facilities;
- Clean surfaces used for food preparation that are sanitized before and after each snack or meal; and
- Wearing of non-porous gloves by staff and volunteers when they are in contact with spills of blood or other bodily fluids.

SEASONAL DAY CAMP PROGRAMS: The parent/guardian is responsible for selecting a caretaker who can meet health and safety requirements. However, Seasonal Day Camps standards for health and wellness provide a basis for accreditation through the American Camping Association, Inc. Standards focus on health and safety practices. Accreditation indicates to the public that the camp administration has voluntarily allowed its practices to be compared with the standards established by professionals in the camping industry. At least once every three years an outside team of trained camping professionals visits the accredited camp to verify compliance with the standards. Seasonal Camps are scored on the following criteria:

- First Aid and Emergency Care Personnel;
- Health History;
- Health Care Policies and Procedures;
- Health Care Policy/Procedures Review;
- Contact Information;
- Health Exam;

- Permission to Treat;
 - Health Information Review and Screening;
 - Informing staff of special needs;
 - Health Care Personnel;
 - Treatment Procedures;
 - Staff Training;
 - Away from main camp (out-of-camp) trips;
 - Special Medical Needs;
 - Health Care Center;
 - Supervision in Health Care Center;
 - Parent Notification;
 - Medication Management;
 - Recordkeeping; and
 - Record Maintenance.
-
- Building and physical premises safety

ECEAP PROGRAM: ECEAP Program Performance Standards require indoor/outdoor facilities must be safe, in good repair, sanitary and barrier free for all children and adults. Appropriate provisions for safe storage of flammable, toxic and hazardous materials must be made. Facilities must include regularly updated and inspected smoke detectors and fire alarms. Flaking or deteriorating lead-based paint must be refinished with lead-free paint or other non-toxic materials. Emergency lighting must be available in each group setting. Spaces occupied by children must be accessible to adults at all times that children are present. Provisions must be made to fence or supervise outdoor play areas sufficiently to prevent children from leaving the premises and wandering into unsafe and unsupervised areas.

Programs located in schools must adhere to the Washington State Primary and Secondary Schools Facilities Standards. All other program locations must follow DSHS Child Care Center Licensing Guidelines. Programs must establish a systematic review of facilities for compliance with safety regulations.

SEASONAL DAY CAMP PROGRAMS: Seasonal Camps are scored on criteria assessing whether or not a site will be accredited using standards listed in the *Accreditation Standards for Camp Programs and Services published by the Americam Camping Association, Inc.* (See Attachment 29, *American Camping Association Accreditation Standards for Camp Programs and Services*).

- Health and safety training

ECEAP PROGRAM: ECEAP Program Performance Standards require staff working with children to receive training in child health and safety. Specific training must be provided concerning pediatric emergency first aid and cardiopulmonary resuscitation (by a certified instructor in infant/child CPR, food handling and first aid treatment).

Potential indicators reflecting operation of the standard:

- Staff interviews, written developmental and training plans, program planning materials, program policy and procedure manuals, meeting minutes, individual staff development plans and evaluations indicate staff received or will receive training in child health and safety.
- Outlines, agenda's, training notes for health/safety training opportunities are on file and confirm training required by the standard.
- Staff develop plans confirm options and timelines for health and safety training.
- A copy of the CPR instructor's certification is on file.
- Pediatric emergency first aid, cardiopulmonary resuscitation, and food handling certificates for appropriate staff members are on file.

SEASONAL DAY CAMP PROGRAMS: Seasonal Day Camps staff receive training in the camps written procedures to:

- Identify staffs role and responsibilities in camp health care;
- Prepare staff to use health care supplies and equipment with which they will be furnished;
- Identify those situations which should be attended to only by a certified health personnel, and
- Use established sanitary procedures when dealing with infectious waste or body fluids.

In addition, Seasonal Day Camps require providers with the following qualifications to be on duty for emergency care:

- CPR certification from a nationally-recognized provider;
- First Aid certification from a nationally-recognized provider

Section 6.2 - Health and Safety Requirements for Group Home Providers
(658E(c)(2)(F), §§98.41, 98.16(j))

6.2.1 Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

- () YES, answer 6.2.2 and proceed to 6.3.
- () NO, answer 6.2.2 and 6.2.3.

Note: Washington State Does Not Use Group Home As A Category of Child Care.

6.2.2 Have group home licensing requirements as relates to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

() NO

() YES, and the changes are as follows:

6.2.3 For that group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

Section 6.3 - Health and Safety Requirements for Family Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.3.1 Are all family child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

(X) YES, answer 6.3.2 and proceed to 6.4.

() NO, answer 6.3.2 and 6.3.3.

6.3.2 Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

(X) NO

() YES, and the changes are as follows:

6.3.3 For that family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

Note: Homes that are not subject to licensing must be “certified” as meeting Washington State licensing requirements, or have an approved federal plan

in accordance with national or state standards or standards for health and safety.

The department may certify a family day care home for payment if the home is:

- **Licensed by an Indian tribe; or**
- **Certified by the Federal Department of Defense.**

- The prevention and control of infectious disease (including age-appropriate immunizations)

- Building and physical premises safety

- Health and safety training

Section 6.4 - Health and Safety Requirements for In-Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.4.1 Are all in-home child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation referenced above?
If:
() YES, answer 6.4.2 and proceed to 6.5.
(X) NO, answer 6.4.2 and 6.4.3.

6.4.2 Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

(X) NO
() YES, and the changes are as follows:

6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

Effective Date: October 1, 2003 70

Amended Effective: _____

- The prevention and control of infectious disease (including age-appropriate immunizations)

The parent/guardian is responsible for selecting a caretaker who can meet the above requirements and responsibilities. The parent/guardian signs a DSHS assurance, that minimum requirements are met. Authorizing workers give every client considering the use of in-home child care a copy of *Guide to In-Home/Relative Child Care* which contains a check list for parents who are considering choosing in-home child care. In home/relative care providers must be physically, mentally, and emotionally healthy, and able to follow standards and guidelines (See Attachment 30, *A Guide To In-Home/Relative Child Care* (DSHS 22-223(x) (Rev. 5/02)).

- Building and physical premises safety

The parent/guardian is responsible for selecting an in-home/relative care provider who can meet the above requirements and responsibilities. The parent/guardian signs a DSHS assurance that minimum requirements are met. The parent/guardian must assure that the “in-home/ relative care provider or relative is informed about basic health practices, prevention and control of infectious disease, immunizations, and building and physical premises safety, relative to the care of children.”

- Health and safety training

The parent/guardian is responsible for selecting a caretaker who can meet the above requirements and responsibilities. The parent guardian signs a DSHS assurance that minimum requirements are met. The parent/guardian must assure that the “in-home caretaker or relative is informed about basic health practices, prevention and control of infectious disease, immunizations, and building and physical premises, safety, relative to the care of children.”

In addition, the in-home/relative care provider must submit a criminal history and background inquiry form for clearance. The department compares the criminal background information including pending charges with convictions listed in WAC 388-290-882 and 388-290-886. The department determines if the in-home relative care provider’s background contains information that will not allow the authorization of payment towards the cost of child care. If the in-home/relative care provider cannot be cleared, the department notifies the parent and denies or stops payment toward the cost of care for this in-home/relative care provider. The department then assists the parents in finding other child care arrangements. If the in-home/relative care provider has no criminal history

information on file, the provider will receive a letter stating they are cleared to provide care.

Section 6.5 - Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be exempted from health and safety requirements (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:

- (X) All relative providers are subject to the same requirements as described in sections 6.1 - 6.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.
- () All relative providers are exempt from all health and safety requirements.
- () Some or all relative providers are subject to different health and safety requirements from those described in sections 6.1 - 6.4. The following describes those different requirements and identifies the relatives they apply to:

Note: The only exemption is for immunization requirements for in-home exempt care.

Section 6.6 - Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively enforced:

- Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?
 - () No
 - (X) Yes, and the following indicates the providers subject to routine unannounced visits and the frequency of those visits.

Licensors make annual unannounced monitoring visits to Child Care Centers, and monitor Family Child Day Care Homes every 18 months. The purpose is to inspect the facility or home to determine compliance with the Washington Administrative Code (WAC) Minimum Licensing Requirements (MLR'S) and Revised Code of Washington (RCW).

- Are child care providers subject to background checks?
 - () No
 - (X) Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):

All providers, assistants, and volunteers of licensed child care centers,; and providers and members of family child care households, sixteen years of age or older, who have unsupervised or regular access to the child in care are required to submit a criminal history and background inquiry form that is processed through the Washington State Patrol. Providers, assistants, and volunteers in licensed child care centers; and providers, assistants, volunteers and members of family child care households must submit to a fingerprint and FBI process if residing within the State of Washington less than three years. The inquiry information is also checked for CPS involvement that would disqualify the person from providing child care.

- Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)
 - () No
 - (X) Yes, and the following describes the State's reporting requirements and how such injuries are tracked (if applicable).

Licensed child care providers are required to report a death of a child, or certain injuries or illnesses that occur on the premises, to Children's Administration CPS Intake. Reportable injuries are those requiring medical treatment, and reportable illnesses are those that require hospitalization of a child in care. All reports of serious injury are screened for investigation.

Accident injury reports are part of the licensing history. If the complaint, upon investigation, is found to rise to the level of child abuse or neglect, that complaint becomes part of the Division of Licensed Resources/Child Protective Services complaint history of the licensed facility

- Other methods used to ensure that health and safety requirements are effectively enforced:

Division of Child Care and Early Learning Licensors:

- Offer orientation sessions to potential applicants explaining minimum licensing requirements (MLRs);
- Ensure applicants complete necessary processes and paperwork;
- Inspect facilities to determine compliance with Washington Administrative Code (WAC) MLR and Revised Code of Washington(RCW);
- Collaborate with applicants/providers to complete a "Corrective Action Plan" to correct any compliance deficiencies;
- Coordinate with State Fire Marshal's office for meeting fire safety standards;
- Coordinate with Health Specialists regarding inspections for the health certification of child care centers;
- Issue an appropriate facility license within ninety days of receipt of a complete application, or decide to deny the facility application;

Effective Date: October 1, 2003 73

Amended Effective: _____

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- Monitor facilities for compliance with the WAC;
 - Investigate licensing complaints against child care facilities and determine plan of correction, if needed. (Abuse and neglect complaints against licensed child care facilities are investigated by specialized investigators in the Division of Licensed Resources);
 - Re-license facilities every three years.

Division of Licensed Resources/Child Protective Services:

- Investigates complaints about child abuse and neglect in child care facilities.

Division of Child Care and Early Learning Health Specialists:

- Inspect facilities to determine health and safety compliance with Washington Administrative Code (WAC) and Revised Code of Washington (RCW 74.15), and certifies, denies or revokes health certification;
- Evaluate initial compliance to achieve initial health certification of child care center;
- Coordinate with DCCEL licensors; survey child care centers for health and safety concerns referred to them by the DCCEL licensors;
- Provide technical assistance to providers, write Statements of Deficiencies and obtain Plans of Correction;
- Re-certify child care centers for health and safety every 3 years when staffing levels permit; and,
- May decertify for just cause, which is reported to the DCCEL licensors.

Information about licensing requirements is made available through the following:

- The network of resource and referral agencies throughout the state;
- The publication, *Choosing Child Care: A Consumer Guide for Parents*;
- Orientation sessions presented by Division of Child Care and Early Learning Staff for providers around the state at which the Minimum Licensing Requirements are distributed;
- Minimum Licensing Requirements posted on DCCEL's internet website www.dshs.wa.gov/esa/dccel, and made available to anyone who requests a copy;
- The DSHS quarterly newsletter, the "Link", which is available on line at www.dshs.wa.gov/esa/dccel. Providers, licensors, advocates, and other stakeholders who are part of DCCEL's listserve receive notice when this newsletter is posted.

Section 6.7 – Exemptions from Immunization Requirements

The State assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/03 – 9/30/05

The State exempts the following children from immunization (check all that apply):

- ☒ Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- ☒ Children who receive care in their own homes.
- ☒ Children whose parents object to immunization on religious grounds.
- ☒ Children whose medical condition contraindicates immunization.

PART 7 - HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

Section 7.1 - Health and Safety Requirements for Center-Based Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

For all center-based care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

Section 7.2 - Health and Safety Requirements for Group Home Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

For all group home care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety

- Health and safety training

Section 7.3 - Health and Safety Requirements for Family Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all family child care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

Section 7.4 - Health and Safety Requirements for In-Home Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all in-home care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety

- Health and safety training

Section 7.5 - Exemptions to Territorial Health and Safety Requirements

At Lead Agency option, the following relatives may be exempted from health and safety requirements: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:

- () All relative providers are subject to the same requirements as described in sections 7.1 - 7.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.
- () All relative providers are exempt from all health and safety requirements.
- () Some or all relative providers are subject to different health and safety requirements from those described in sections 7.1 - 7.4 and the following describes those different requirements and the relatives they apply to:

Section 7.6 - Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how Territorial health and safety requirements are effectively enforced:

- Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?
 - () No
 - () Yes, and the following indicates the providers subject to routine unannounced visits and the frequency of those visits.

- Are child care providers subject to background checks?
 - ☐ No
 - ☐ Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):

- Does the Territory require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)
 - ☐ No
 - ☐ Yes, and the following describes the Territory's reporting requirements and how such injuries are tracked (if applicable).

- Other methods used to ensure that health and safety requirements are effectively enforced:

Section 7.7 – Exemptions from Immunization Requirements

The Territory assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the Territorial public health agency. (§98.41(a)(1))

The Territory exempts the following children from immunization (check all that apply):

- _____ Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- _____ Children who receive care in their own homes.
- _____ Children whose parents object to immunization on religious grounds.
- _____ Children whose medical condition contraindicates immunization.

STATE PLAN FOR

CHILD CARE & DEVELOPMENT FUND SERVICES

(FOR THE PERIOD 10/1/03 – 9/30/05)

APPENDIX 1 -- PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- (3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (6) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families.

STATE PLAN FOR

CHILD CARE & DEVELOPMENT FUND SERVICES

(FOR THE PERIOD 10/1/03 – 9/30/05)

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

Note: the one exception is for children served with protective services child care as noted in section 4.3 above

- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))
- (3) it will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

STATE PLAN FOR

CHILD CARE & DEVELOPMENT FUND SERVICES

(FOR THE PERIOD 10/1/03 – 9/30/05)

APPENDIX 2 - ELIGIBILITY AND PRIORITY TERMINOLOGY:

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must define the following *italicized* terms. (658P, 658E(c)(3)(B))

(1) *job training and educational program* -

- **Basic Education** includes High School completion and classes to prepare for and testing to acquire GED certification and may include adult basic education (ABE) or English as a second language (ESL).
- **Vocational Education** is training in a specific occupation provided by a technical school or community college administered or certified by the state, or provided by a regionally certified tribal college. It also includes job skills training and pre-employment training in specific skills offered through community-based organizations, businesses and tribal governments.
- **High Wage High Demand** is full-time training that will lead to a certificate or degree that will lead to employment in a high wage high demand field.
- **Customized Job Skills Training** is full-time individualized or group training for specific jobs with a higher than average starting wage.
- **Job Skills Training** is work related foundation job skills not tied to a specific job.

(2) *attending* (a job training or educational program; include minimum hours if applicable) -

- TANF families must participate in TANF WorkFirst approved activities for the amount of time specified in the participant's Individual Responsibility Plan;
- Non-TANF families must be enrolled and going to a job training or educational program.
- Families with children in protective services may be enrolled and going to a job training or educational program, or may receive child care services for other needs related to the child's health and safety.

(3) *in loco parentis* -

- An adult caring for a minor in the absence of the natural, adoptive or step parent(s) and is:
 - 1) The sibling or step-sibling;
 - 2) Nephew or niece, aunt, uncle, grandparent, or any of the previous relatives with the prefix great, or;
 - 3) Not a relative, court-ordered guardian or custodian. This adult must receive a Washington State Assistance to Needy Families (TANF) grant on behalf of the minor prior to being considered a consumer of Working Connections Child Care (WCCC).

(4) *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) -

STATE PLAN FOR

CHILD CARE & DEVELOPMENT FUND SERVICES

(FOR THE PERIOD 10/1/03 – 9/30/05)

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- **Physically, mentally, behaviorally, or emotionally incapable of self-care, as verified by a health, mental health, education or social service professional with at least a master's degree, or by a registered nurse.**
- (5) *protective services -*
- **Family is currently receiving services through Children's Administration, the Division of Alcohol and Substance Abuse, a homeless or domestic violence shelter. Also, when a child resides with a relative or foster parent for safety or protective reasons, that child meets the protective services definition for child care or early childhood purposes.**
 - **"Respite Care Services" means the temporary, planned arrangement for substitute parenting or care-taking of a child. Respite services are typically available to provide opportunities to attend overnight training; provide substitute care in the absence of a caregiver; allow the caregiver personal time away from home; or to offer relief from parenting and care-giving responsibilities.**
- (6) *residing with –*
- **Living together in the same household or physical structure.**
- (7) *special needs child -*
- **A child under age 19 having a verified physical, mental, emotional, or behavioral condition that requires a higher level of care compared to other children of the same age or is a dependent of the courts and requires adult supervision. Verification must be made by a health, mental health, education or social service professional with at least a master's degree, or by a registered nurse.**
- (8) *very low income –*
- **Anyone at or below 82% of the Federal Poverty Level and/or receiving TANF.**
- (9) *working (include minimum hours if applicable) –*
- **TANF families who are engaged in employment or other work-like activities.**
 - **Non-TANF families who are engaged in paid employment**
- (10) Additional terminology related to conditions of eligibility or priority established by the Lead Agency:
- **"Family" means one or more individuals in WAC 388-290-0015 who live together in the same household.**